South Carolina Department of Social Services

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) POLICY MANUAL

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South Carolina Department of Social Services

SUPPLEMENTAL FOOD ASSISTANCE PROGRAM (SNAP)

POLICY MANUAL

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Chapter 1

Chapter 1 General Information

1.1 GENERAL PURPOSE

The Supplemental Nutrition Assistance Program (SNAP) is designed to promote the general welfare and to safeguard the health and well-being of the Nation's population by raising the levels of nutrition among low-income households.

It permits low income households to obtain a more nutritious diet, through normal channels of trade, by increasing food purchasing power for all eligible households who apply for participation.

1.2 OPERATION OF THE SNAP

The SNAP is operated under the provisions in the Food and Nutrition Act of 2008 (as amended). The eligibility of the Act is further developed in **Title 7, Code of Federal Regulations,** Parts 210 through 299. SNAP is administered by the Food and Nutrition Service (FNS) under the United States Department of Agriculture (USDA). The Secretary of Agriculture establishes uniform national standards of eligibility for participation. The address for the USDA, FNS Regional Office for Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee is:

Southeast Regional Office
U.S. Department of Agriculture, Food and Nutrition Service
61 Forsyth Street S.W., Room 8T3
Atlanta, GA 30303-3427.

The South Carolina Department of Social Services (SCDSS) is responsible for the administration of the SNAP within the State of South Carolina, including, but not limited to:

(1) Certification of applicant households;
(2) Issuance, control, and accountability of SNAP benefits;
(3) Developing and maintaining complaint procedures;
(4) Developing, conducting, and evaluating training;
(5) Conducting performance reporting reviews;

(6) Keeping records necessary to determine whether the program is being conducted in compliance with these regulations;
(7) Submitting accurate and timely financial and program reports; and
(8) Determining the amount of, and settling, adjusting, compromising or denying all or part of any claim which results from fraudulent or non-fraudulent over-issuances to participating households.

1.3 GENERAL TERMS AND CONDITIONS

General terms and condition of the SNAP are:

(1) SNAP benefits do not count as income to reduce benefits

The SNAP benefit allotment provided to any eligible household will not be considered income or resources for any purpose under any Federal, State, or local laws including, but not limited to, laws on taxation, welfare, and public assistance programs.

(2) No sales taxes on SNAP purchases

No local sales taxes or other taxes or fees, including but not limited to excise taxes, can be collected within the State on purchases made with SNAP benefits. Where the total value of eligible foods being bought by the recipient is larger than the amount of SNAP benefits being presented by the recipient, only the portion of the sale made in exchange for SNAP benefits must be exempt from taxation. Although a SNAP recipient may use a combination of cash and SNAP benefits in making a food purchase, only the dollar amount represented by the SNAP benefits needs to be exempt from taxation.

(3) Disclosure.

Use or disclosure of information obtained from SNAP applicant or recipient households will be restricted to:

A. Persons directly connected with the administration or enforcement of the provisions of the Food and Nutrition Act or regulations, other Federal assistance programs, federally-assisted State programs providing assistance on a means-tested basis to low income individuals, or general assistance programs which are subject to the joint application processing requirements.
B. Persons directly connected with the administration or enforcement of the programs which are required to participate in the State Income and Eligibility Verification System (IEVS/SVES) to the extent the SNAP information is useful in establishing or verifying eligibility or benefit amounts under those programs.

C. Persons directly connected with the verification of immigration status of aliens applying for SNAP benefits, through the Systematic Alien Verification for Entitlements (SAVE) Program to the extent the information is necessary to identify the individual for verification purposes.
D. Persons directly connected with the administration of the Child Support Program under part D, title IV of the Social Security Act in order to assist in the administration of that program, and employees of the Secretary of Health and Human Services as necessary to assist in establishing or verifying eligibility or benefits under titles II and XVI of the Social Security Act;
E. Employees of the Comptroller General's Office of the United States for audit examination authorized by any other provision of law;
F. Local, State, or Federal law enforcement officials, upon their written request, for the purpose of investigating an alleged violation of the Food and Nutrition Act or regulation. The written request must include the identity of the individual requesting the information and his authority to do so, violation being investigated, and the identity of the person on whom the information is requested; and
G. Local, State or Federal law enforcement officers, acting in official capacity, upon written request, for the purpose of obtaining the address, social security number, and, if available, photograph of any household member, if the member is fleeing to avoid prosecution or custody for a crime, or an attempt to commit a crime, that would be classified as a felony, or is violating a condition of probation or parole imposed under a Federal or State law.

NOTE: The Agency will not require a household to present photographic identification as a condition of eligibility and must accept any document that reasonably establishes the applicant's identity.

The Agency will also provide information regarding a household member, upon the written request of a law enforcement officer acting in his or her official capacity, where such member has information necessary for the apprehension or investigation of another member who is fleeing to avoid prosecution or custody for a felony, or has violated a condition of probation or parole. The Agency will disclose only such information as is necessary to comply with a specific written request of a law enforcement agency authorized by this paragraph.

Agency recipients of information released under this section must adequately protect the information against unauthorized disclosure to persons or for purposes not specified in this section. In addition, information received through the IEVS must be protected from unauthorized disclosure as required by regulations established by the information provider.

If there is a written request by a responsible member of the household or the currently authorized representative, to review material and information contained in its case file, the material and information contained in the case file will be made available for inspection during normal business hours. However, the Agency may withhold confidential information, such as the names of individuals who have disclosed information about the household without the household's knowledge, or the nature or status of pending criminal prosecutions.

(4) Information available to the public

Federal regulations, Federal procedures embodied in FNS notices and policy memos, State Plans of Operation, and corrective action plans will be available upon request for examination by members of the public during office hours at the SNAP Unit at SCDSS State Office, as well as at USDA FNS regional and national offices.

The SNAP Policy Manual will be available for examination upon request at each local county DSS as well as at the SNAP Unit at SCDSS State Office and FNS Regional offices.

(5) Records and reports

SCDSS will keep such records and submit such reports and other information as required by USDA FNS.

(6) Retention of records

SCDSS, including each local county office and State Office will retain all SNAP program records in an orderly fashion. For audit and review purposes, all information used to determine eligibility will be retained for a period of 3 years from the current certification period (four (4) years from the current date). The Agency will retain fiscal records and account documents for 3 years from the date of fiscal or administrative closure. Fiscal closure means that obligations for or against the Federal government have been liquidated. Administrative closure means that SCDSS has determined and documented that no further action to liquidate the obligation is appropriate. Fiscal records and account documents include, but are not limited to claims and documentation of lost benefits.

1.4 INFORMATIONAL ACTIVITIES

SNAP "program informational activities" are those activities that convey information about the SNAP, including household rights and responsibilities, through means such as publications, telephone hotlines, and face-to-face contacts. SCDSS will comply with the following minimum information requirements for applicants and recipients.

(1) Nutrition information.

USDA FNS must encourage SCDSS to develop Nutrition Education Plans to inform applicant and participant households about the importance of a nutritious diet and the relationship between diet and health.

SCDSS will encourage program participants to participate in the Expanded Food and Nutrition Education Program (EFNEP) and, wherever practicable, allow EFNEP personnel to come into local county SNAP offices to distribute informational materials and speak with SNAP recipients.

2) Rights and responsibilities.

SCDSS will inform participant and applicant households of their SNAP rights and responsibilities.

All SNAP informational material will be available in languages other than English as required and will include a statement that the SNAP is available to all without regard to race, color, sex, age, disability, religious creed, national origin or political belief.

SNAP certification workers must provide the **DSS Brochure 2416, Know Your Civil Rights**, to applicants during the application interview. This brochure must also be made available at face-to-face or telephone recertification.

1.5 SNAP NONDISCRIMINATION COMPLIANCE

The Agency will not discriminate against any applicant or participant in any aspect of SNAP administration, including, but not limited to, the certification of households, the issuance of SNAP benefits, the conduct of fair hearings, or the conduct of any other SNAP service for reasons of age, race, color, sex, disability, religious creed, national origin, or political beliefs.

Individuals who believe that they have been subject to discrimination as specified in the paragraph above may file a written or oral complaint.

The SNAP certification worker must assist the individual in completing a **DSS Form 2601, Civil Rights Discrimination Complaint Form**. If a complainant makes allegations verbally and is unable or is reluctant to put the allegations in writing, the Agency employee to whom the allegations are made will document the complaint in writing. Every effort must be made by the individual accepting the complaint to have the complainant provide the information specified above.

The **DSS Form 2601, Civil Rights Discrimination Complaint Form** will be forwarded to the Agency's Division of Individual and Provider Rights (DIPR), Office of Civil Rights for investigation. (DIPR), Office of Civil Rights will send the individual a letter to acknowledge receipt of the complaint. The letter will also include the plan of action or, if necessary, a request for additional information.

Each local county office must display the **DSS Poster 2660, Do You Need an Interpreter or Other Special Arrangements,** the **DSS Poster 2661, Interpretation Service Available,** and the **USDA FNS Form AD 475B, And Justice for All**, to ensure that all SNAP applicants or recipients have access to nondiscrimination statutes and policies.

1.6 COMPLAINT PROCEDURE

The Agency, both State Office and local offices, will maintain a system for handling program complaints filed by participants, potential participants, or other concerned individuals or groups.

This will not include complaints alleging discrimination on the basis of race, sex, age, religious creed, national origin, political beliefs or disability; such complaints will be handled in accordance with **Section 1.5 SNAP Nondiscrimination Compliance**.

Complaints regarding such areas as processing standards and service to participants and potential participants will be handled under this complaint procedure. This procedure will not include complaints that can be pursued through a fair hearing **(Section 18.1 Fair Hearing Definition)**.

The Agency will follow up on complaints, resolve complaints and take corrective action where warranted, and respond to the complainant on the Agency's disposition of the complaint.

The Agency will make information on the complaint system and how to file a complaint available to participants, potential participants and other interested persons.

The Agency will maintain records of complaints received and their disposition, and will review records at least annually to assess whether patterns of problems may be present in local offices or throughout the State.

The results of this review will be provided to the State SNAP Management Evaluation (ME) Review Coordinator (**Chapter 26 Management Evaluation (ME) Reviews**) and State Corrective Action Coordinator for appropriate action, and for inclusion, if appropriate, in the State Corrective Action Plan (CAP) **(Chapter 28 Corrective Action)**. This information will include the identification, if any, of potential or actual patterns of deficiencies in local offices or throughout the State, and any identification of causes of these problems. USDA FNS will monitor the Agency's compliance with these requirements.

1.7 ACTIONS ON CASES OF RELATIVES

The certification worker is responsible for determining SNAP eligibility. The certification worker should not be responsible for any case involving a person related to him/her or any case where a conflict of interest exists and should not take any action on these cases. Any case where a conflict of interest exists should be brought to the attention of the certification supervisor. The certification supervisor must assign the case to a certification worker who is not related to any person included in the case or a certification worker who does not have a conflict of interest with the case.

Chapter 2 Household Concept

2.1 GENERAL HOUSEHOLD DEFINITIONS

A household is composed of one of the following individuals or groups of individuals, unless otherwise specified in **Section 2.2, Special Household Requirements:**

(1) An individual living alone;
(2) An individual or group of individuals living with others, but customarily purchasing food and preparing meals for home consumption separate and apart from others; or
(3) A group of individuals who live together and customarily purchase food and prepare meals together for home consumption.

2.2 SPECIAL HOUSEHOLD REQUIREMENTS

Special household requirements for the SNAP are:

(1) Required household combinations

The following individuals who live with others must be considered as customarily purchasing food and preparing meals with the others, even if they do not do so, and thus must be included in the same household, unless otherwise specified.

(A) A person living with his/her spouse (including common-law and same sex, in some instances. See note below);
Note: Same sex spouses must be considered married and part of the same household for SNAP eligibility purposes if their marriage is recognized in the jurisdiction (state) where the marriage occurred.
(B) A person under 22 years of age who is living with his or her natural or adoptive parent(s) or step-parent(s); and
(C) A child (other than a foster child) under 18 years of age who lives with and is under the parental control of a household member other than his or her parent.

A child must be considered to be under parental control if he or she is financially or otherwise dependent on an adult member of the household. Likewise, an individual who is 18 years of

age and is under parental control of an adult relative who is receiving FI benefits for the individual must be included in the same SNAP household with adult relative.

(2) Elderly and disabled persons

Notwithstanding the provisions of **Section 2.1, General Household Definition**, an otherwise eligible member of a household who is 60 years of age or older and is unable to purchase and prepare meals because he or she suffers from a disability considered permanent under the Social Security Act (**See Section 5.1 Verification Prior to Certification, (5) *Disability***) or a non-disease-related, severe, permanent disability may be considered, together with his or her spouse (if living there), a separate household from the others with whom the individual lives. Separate household status under this provision must not be granted when the income of the others with whom the elderly disabled individual resides (excluding the income of the elderly and disabled individual and his or her spouse) exceeds 165 percent of the poverty level. The elderly and disabled individual (or his/her authorized representative (**Section 3.5 Authorized Representatives**), will be responsible for obtaining the cooperation of the individuals with whom he/she resides in providing the necessary income information about the others to the Agency for purposes of this section.

The gross income from members of the household that the elderly or disabled person lives with must not exceed 165 percent of poverty for the appropriate household size prior to determining eligibility for separate household under this provision.

Household size	Gross monthly income (165 percent of poverty)
1	$1580
2	$2133
3	$2686
4	$3239
5	$3791
6	$4344
7	$4897
8	$5450
Each additional member	+ $553

(3) Boarders

Residents of a commercial boarding house, regardless of the number of residents, are not eligible to participate in the SNAP. A commercial boarding house is an establishment licensed, or unlicensed, that offers meals and lodging for compensation with the intent of making a profit.

All other individuals or groups of individuals paying a reasonable amount for meals or meals and lodging must be considered boarders and are not eligible to participate in the SNAP independently

of the household providing the board. Boarders may participate, along with a spouse or children living with them, as members of the household providing the boarder services, only at the request of the household providing the boarder services.

An individual paying less than a reasonable amount for board must not be considered a boarder but must be considered, along with a spouse or children living with him or her, as a member of the household providing the board.

(A) For individuals whose board arrangement is for more than two meals per day, "reasonable compensation" must be an amount that equals or exceeds the SNAP allotment for the appropriate size of the boarder household.
(B) For individuals whose board arrangement is for two meals or less per day, "reasonable compensation" must be an amount that equals or exceeds two-thirds of the maximum SNAP allotment for the appropriate size of the boarder household.

Boarders must not be considered to be residents of an institution.

(4) Foster care individuals

Individuals placed in the home of relatives or other individuals or families by the Agency's foster care program must be considered to be boarders. They cannot participate in the SNAP independently of the household providing the foster care services.

Such foster care individuals may participate, along with a spouse or children living with them, as members of the household providing the foster care services, only at the request of the household providing the foster care.

(5) Roomers.

Individuals to whom a household furnishes lodging (but not meals) for compensation may participate as separate households.

(6) Live-in attendants

A live-in attendant may participate as a separate household. Persons described **in 2.2 Special Household Requirements: (1) *required household combinations*** must not be considered live-in attendants.

2.3 INELIGIBLE HOUSEHOLD MEMBERS

The following persons are not eligible to participate as separate households or as a member of any household:
(1) Ineligible aliens as specified in **Section 7.3 Alien Eligibility**;
(2) Ineligible students as specified in **Section 7.4 Students**;

(3) Individuals disqualified for noncompliance with the work requirements of **Section 8.1 Work Requirements**;
(4) Individuals disqualified for failure to provide a SSN as specified in **Section 7.2 Social Security Numbers (SSN's)**;
(5) Individuals disqualified for an intentional program violation (IPV) as specified in **Chapter 20 Disqualification for Intentional Program Violation (IPV)**; and
(6) Individuals who are ineligible because of a drug-related felony conviction. A drug related felony conviction is a conviction of any offense which is classified as a felony and which has as an element of the possession, use or distribution of a controlled substance. Ineligibility under this provision is limited to convictions based on behavior which occurred after August 22, 1996.

Note: An individual may be disqualified from participation in SNAP only for a conviction of a drug related felony which he/she committed after August 22, 1996. The issue is the date of the offense not the date of the conviction.

Exception: Clients who provide verification of expungement or a pardon of a felony drug conviction may be eligible to participate in SNAP.

~~***Note: Receiving a pardon is not sufficient for SNAP eligibility.***~~

(7) Individuals who are fleeing to avoid prosecution or custody for a crime, or an attempt to commit a crime, or who are violating a condition of probation or parole. The Agency will contact the Fugitive Information Offender Surveillance (FIOS) Central Office at (803) 734-9301 to ensure that the individual in question is a fleeing felon.
(8) Residents of an institution, with **some exceptions (see below)**. Individuals must be considered residents of an institution when the institution provides them with the majority of their meals (over 50 percent of three meals daily) as part of the institution's normal services.

Exceptions to this requirement include only the individuals listed below who can participate in the SNAP and must be treated as separate households from the others with whom they reside, and are subject to the mandatory household combination requirements of **2.2 Special Household Requirements: (1) *required household combinations*,** unless otherwise stated below:

(A) Individuals who are residents of federally subsidized housing for the elderly;
(B) Individuals who are narcotic addicts or alcoholics and reside at a facility or treatment center for the purpose of regular participation in a drug or alcohol treatment and rehabilitation program. This includes the children but not the spouses of such persons who live with them at the treatment center or facility (See section **14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA'S**);
(C) Individuals who are disabled or blind and are residents of group living arrangements (See section **14.4 Residents of a Group Living Arrangement (GLA)**)**;**

(D) Individual women or women with their children who are temporarily residing in a shelter for battered women and children (See section **14.5 Shelter for Battered Women and Children**); and
(E) Individuals who are residents of public or private nonprofit shelters for homeless persons (See section **14.6 Homeless SNAP Households**).

2.4 STRIKERS

Households with a striking member are not eligible to participate in the SNAP, unless the household was eligible for benefits the day before the strike and is otherwise eligible at the time of application.
A striker must be anyone involved in a strike or concerted stoppage of work by employees (including a stoppage by reason of the expiration of a collective-bargaining agreement) and any concerted slowdown or other concerted interruption of operations by employees.

Any employee affected by a lockout, however, must not be deemed to be a striker. Further, an individual who goes on strike but is exempt from work registration under **Section 8.2 Exemptions from Work Requirements** the day before the strike, other than those exempt solely on the grounds that they are employed, must not be deemed to be a striker. Also, persons such as truck drivers who cannot do their jobs because the strike has left them with nothing to deliver, and employees who are not part of the bargaining unit and do not want to cross the picket line for fear of personal injury or death, must not be deemed to be strikers.

Pre-strike eligibility must be determined by considering the day prior to the strike as the day of application and assuming the strike did not occur. Eligibility at the time of application must be determined by comparing the striking member's income before the strike to the striker's current income and adding the higher of the two to the current income of non-striking members during the month of application. If the household is eligible, the higher income figure must also be used in determining the household's benefits.

Chapter 3

Chapter 3 Filing an Application

3.1 OPERATION OF SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) OFFICES

The Agency must establish procedures for the operation of SNAP local county offices that best serve households in the State, including households with special needs, such as, but not limited to:

(1) Households with elderly or disabled members,
(2) Households in rural areas with low-income members,
(3) Homeless individuals,
(4) Households with adult members who are not proficient in English, and
(5) Households with earned income (working households).

The Agency must provide timely, accurate, and fair service to applicants for, and participants in, the SNAP. The Agency cannot, as a condition of eligibility, impose additional application or application processing requirements and must base SNAP eligibility solely on the criteria contained in this policy manual. The Agency must inform persons who wish to apply for SNAP benefits about the application process and their rights and responsibilities.

3.2 SNAP APPLICATION FORM

The application form for SNAP benefits consists of the:

DSS Form 3800, Application for Family Independence, Supplemental Nutrition Assistance Program and Refugee Assistance Program (RA);

NOTE: The DSS Form 1667, Client Information Questionnaire, may be used in conjunction with the DSS Form 3800 to obtain information.

(1) Content

This form contains:

- A place on the first page of the application where the applicant can write his/her name, address, and signature and notification of the household's right to immediately file the

application as long as it contains the applicant's name and address and the signature of a responsible household member or the household's authorized representative;

- The option of answering only those questions relevant to the program or programs for which they are applying.
- A statement that the information provided by the applicant in connection with the application for SNAP benefits will be subject to verification by Federal, State and local officials to determine if such information is factual;
- A statement that if any information is incorrect, SNAP benefits may be denied to the applicant; and that the applicant may be subject to criminal prosecution for knowingly providing incorrect information;
- A description of the civil and criminal provisions and penalties for violations of the Food and Nutrition Act;
- A statement to be signed by one adult household member which certifies, under penalty of perjury, the truth of the information contained in the application, including the information concerning citizenship and alien status of the members applying for benefits;
- A description of the expedited service rules (See **Section 6.5 Entitlement to Expedited Service;**
- Notification that benefits are provided from the date of application; and
- The following nondiscrimination statement on the application itself even if the State agency uses a joint application form:

    - **"In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs, or disability.**
    - **"To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, S.W., Washington, D.C. 20250–9410 or call (202) 720–5964 (voice and TDD). USDA is an equal opportunity provider and employer."**

SNAP applicants can also use the federal SNAP application used by all Social Security Administration offices. This form can be processed by county offices to determine SNAP eligibility.

Information regarding application forms for the South Carolina Combined Application Project (SCCAP) and the Elderly Simplified Application Project (ESAP) in **Chapter 19 Federal Demonstration Projects**.

(2) Required Notifications

A. Immigration and Naturalization Service (INS)

The Agency must also notify all applicants on the application form that the alien status of applicant household members may be subject to verification by Immigration and Naturalization Service (INS), through the submission of information from the application to INS, and that the

submitted information received from INS may affect the household's eligibility and level of benefits.

B. Income and eligibility verification system (IEVS)

The Agency must notify all applicants for SNAP benefits at the time of application and at each recertification through a written statement on or provided with the application form that information available through IEVS will be requested, used and may be verified through collateral contact when discrepancies are found by the Agency, and that such information may affect the household's eligibility and level of benefits. **Section 5.2 Sources of Verification (2) Collateral Contacts** provides policy for the use of collateral contacts.

C. Jointly processed cases

The Agency will notify applicants that they may file a joint application for more than one program or they may file a separate application for SNAP benefits independent of their application for benefits from any other program. All SNAP applications, regardless of whether they are joint applications or separate applications, must be processed for SNAP purposes in accordance with SNAP procedural, timeliness, notice, and fair hearing requirements.

No household will have its SNAP benefits denied solely on the basis that its application to participate in another program has been denied or its benefits under another program have been terminated without a separate determination that the household failed to satisfy a SNAP eligibility requirement.

Households that file a joint application for SNAP and another program and are denied benefits for the other program will not be required to resubmit the joint application or to file another application for SNAP benefits but will have its SNAP eligibility determined based on the joint application in accordance with the SNAP processing timeframes from the date the joint application was initially accepted by the Agency.

D. Privacy Act statement

The Agency must notify all households applying and being recertified for SNAP benefits of the following:

1) The collection of information, including the social security number (SSN) of each household member, is authorized under the Food and Nutrition Act of 2008, as amended. The information will be used to determine whether the household is eligible or continues to be eligible to participate in the SNAP. The Agency will verify this information through computer matching programs. This information will also be used to monitor compliance with program regulations and for program management.

2) This information may be disclosed to other Federal and State agencies for official examination and to law enforcement officials for the purpose of apprehending persons fleeing to avoid the law.
3) If a SNAP claim for over-issuance arises against the household, the information on the application, including all SSNs, may be referred to Federal and State agencies, as well as private claims collection agencies, for claims collection action.
4) Providing the requested information, including the SSN of each household member, is voluntary. However, failure to provide a SSN will result in the denial of SNAP benefits to each individual failing to provide a SSN. Any SSN provided will be used and disclosed in the same manner as SSN of eligible household members.

3.3 FILING AN APPLICATION FOR SNAP

(1) Household's right to file

Households must file SNAP applications by submitting the forms to the SNAP office either:

A. in person,
B. through an authorized representative,
C. by fax,
D. by mail, or
E. by completing an on-line electronic application.

Applications signed through the use of electronic signature techniques or applications containing a handwritten signature and then transmitted by fax or other electronic transmission are acceptable. Any responsible household member may file the application for the household.

The Agency must document the date the application was filed and register the application in the CHIP System. The length of time the Agency has to deliver benefits is calculated from the date the application is filed in the SNAP office. Each household has the right to file an application form on the same day it contacts the SNAP office during office hours. The household will be advised that it does not have to be interviewed before filing the application and may file an incomplete application form as long as the form contains the applicant's name and address, and is signed by a responsible member of the household or the household's authorized representative.

(2) Contacting the SNAP office

The Agency will encourage households to file an application form the same day the household or its representative contacts the SNAP office in person or by telephone and expresses interest in obtaining SNAP assistance or expresses concerns which indicate food insecurity.

If the Agency attempts to discourage households from applying for cash assistance, it will make clear that the disadvantages and requirements of applying for cash assistance do not apply to the SNAP. In addition, it shall encourage applicants to continue with their application for SNAP.

The Agency will inform households that receiving SNAP benefits will have no bearing on any other program's time limits that may apply to the household.

If a household contacting the Agency (SNAP office or the Benefits Services call center) by telephone does not wish to come to the appropriate office to file the application that same day and instead prefers receiving an application through the mail, the Agency will mail an application form to the household on the same day the telephone request is received. An application will also be mailed on the same day a written request for food assistance is received.

Households may contact a SNAP office other than the one designated to service the county in which they reside.

When an application is received in a county other than the county in which the applicant resides, either in person, through the mail, by fax, or online, the receiving office will accept the application, scan and assign to the correct office, as well as give the applicant the address and telephone number of the appropriate office. The applicant will be told benefits and processing standards will begin that day.

(3) Availability of the SNAP application form

The Agency will make application forms for SNAP benefits readily accessible to potentially eligible households. The Agency will also provide an application form to anyone who requests the form and will provide a means for applicants to immediately begin the application process with name, address and signature.

(4) Notice of right to file

The Agency will post DSS Poster 2452, SNAP: Your Rights, in local SNAP offices which explain the application processing standards and the right to file an application on the day of initial contact.

(5) Notice of required verification

The Agency will provide each household at the time of application for certification and recertification with a notice that informs the household of the verification requirements the household must meet as part of the application process. The notice will also inform the household of the Agency's responsibility to assist the household in obtaining required verification provided the household is cooperating with the Agency.

(6) Withdrawing application

The household may voluntarily withdraw its application at any time prior to the determination of eligibility. The Agency will document in the case file the reason for withdrawal, if any was stated by the household, and that contact was made with the household to confirm the withdrawal. The household will be advised of its right to reapply at any time subsequent to a withdrawal.

3.4 HOUSEHOLD COOPERATION IN FILING AN APPLICATION FOR SNAP

To determine eligibility, the SNAP application form must be completed and signed, the household or its authorized representative must be interviewed, and certain information on the application must be verified. If the household refuses to cooperate with the Agency in completing this process, the application will be denied at the time of refusal.

NOTE: For a determination of refusal to be made, the household must be able to cooperate, but clearly demonstrate that it will not take actions that it can take and that are required to complete the application process.

The household will also be determined ineligible if it refuses to cooperate in any subsequent review of its eligibility, including reviews generated by reported changes and applications for recertification. Once denied or terminated for refusal to cooperate, the household may reapply but will not be determined eligible until it cooperates with the Agency.

The Agency will not determine the household to be ineligible when a person outside of the household fails to cooperate with a request for verification.

3.5 AUTHORIZED REPRESENTATIVES

Representatives may be authorized to act on behalf of a household in the application process, in obtaining SNAP benefits, and in using SNAP benefits. The form used to designate an authorized representative is the DSS Form 1632. Designation can also be accomplished by completing the Authorized Representative section on the DSS 3800, Application for Family Independence, Supplemental Nutrition Assistance Program and Refugee Assistance.

(1) Application processing and reporting

The Agency will inform applicants and prospective applicants that indicate they may have difficulty completing the application process, that a non-household member may be designated as the authorized representative for application processing purposes. The authorized representative designated for application processing purposes may also carry out household responsibilities during the certification period, such as reporting changes in the household's income or other household circumstances.

Except for those situations in which a drug and alcohol treatment center **(See Section 14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA's))** or other group living arrangement **(See Section 14.4 Residents of a Group Living Arrangement (GLA))** acts as the authorized representative, the Agency must inform the household that the household will be held liable for any over-issuance that results from erroneous information given by the authorized representative.

A non-household member may be designated as an authorized representative for the application process provided that the person is an adult who is sufficiently aware of relevant household circumstances and the authorized representative designation has been made in writing by the head of the household, the spouse, or another responsible member of the household.

Section 3.5 Authorized Representatives (3) Restrictions on designations of authorized representatives contains further restrictions on who can be designated an authorized representative.

NOTE: In the instance of a limited English proficiency (LEP) household or special needs (i.e. deafness), the authorized representative may not be used in lieu of a qualified interpreter.

Residents of drug or alcohol treatment centers (DAA's) must apply and be certified through the use of authorized representatives in accordance with **Section 14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA's).** Residents of group living arrangements (GLA's) have the option to apply and be certified through the use of authorized representatives in accordance with **Section 14.4 Residents of a Group Living Arrangement (GLA).**

(2) Using SNAP benefits

A household may allow any household member or authorized representative to use its SNAP benefits to purchase food or meals for the household.

Drug or alcohol treatment centers (DAA's) and group living arrangements (GLA's) which act as authorized representatives for residents of the facilities must use SNAP benefits for food prepared and served to those residents participating in the SNAP except when residents leave the facility in accordance with **Section 14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA's)** and **Section 14.4 Residents of a Group Living Arrangement (GLA).**

(3) Restrictions on designations of authorized representatives

The Agency must restrict the use of authorized representatives for purposes of application processing and obtaining SNAP benefits as follows:

(A) State agency employees who are involved in the certification or issuance processes and retailers who are authorized to accept SNAP benefits may not act as authorized representatives without the specific written approval of the respective County Director for the county in which the household resides and only if that County Director determines that no one else is available to serve as an authorized representative.

(B) An individual disqualified for an intentional program violation (IPV) cannot act as an authorized representative during the disqualification period, unless the Agency has determined that no one else is available to serve as an authorized representative

(C) If the Agency has determined that an authorized representative has knowingly provided false information about household circumstances or has made improper use of SNAP benefits, it may disqualify that person from being an authorized representative for up to one year.

The Agency must send written notification to the affected household(s) and the authorized representative 30 days prior to the date of disqualification. The notification must specify the reason for the proposed action and the household's right to request a fair hearing.

This provision is not applicable in the case of drug and alcoholic treatment centers (DAA's) and those group homes (GLA's) which act as authorized representatives for their residents.

However, DAA's and the heads of GLA's that act as authorized representatives for their residents, and which intentionally misrepresent households circumstances, may be prosecuted under applicable Federal and State statutes for their acts.

(D) Homeless meal providers may not act as authorized representatives for homeless SNAP recipients.

In the event a single authorized representative has access to a large number of households' benefits, the Agency will exercise caution to assure that each household has freely requested the assistance of the authorized representative, the household's circumstances are correctly represented, the household is receiving the correct amount of benefits and that the authorized representative is properly using the benefits.

3.6 LIMITED ENGLISH PROFICIENT (LEP) OR SPECIAL NEED HOUSEHOLDS

For a SNAP applicant who may not speak English well or who is deaf, hard of hearing, or visually impaired, a DSS Form 2664, Accommodation Assessment, must be completed at the initial interview/contact with the household. A DSS 2664 is not required for other household members unless another member sometimes communicates with the agency. (See **SNAP Tool Kit: Attachment 1, Accommodation Assessment for LEP Clients, DSS 2664**

Instructions and Training Guide and **SNAP Tool Kit: Attachment 2, Important Points for LEP/SI Clients Economic Services Basic Training Handout**.)

If the assessment determines that accommodations such as an interpreter and translated materials are needed, the accommodations must be provided at no cost to the household. The designation and use of an authorized representative will not be considered an accommodation.

If a SNAP household member does not speak English or is limited English proficient (LEP), the Agency is responsible for obtaining a qualified interpreter. Family members, friends, or the authorized representative should not be used as interpreters. Each local county office has an appointed individual designated to serve as the Client Special Services Coordinator (CSSC). The CSSC is knowledgeable of procedures to secure interpreter services and other services to assist LEP or special needs individuals. Division of Individual and Providers Rights (DIPR) may be contacted if further assistance is needed.

The CHIP System has an "Interpreter needed for" field on Screen INRD. If an interpreter or translated materials are needed, a two letter code must be entered in this field. Valid codes are:

- CH – Chinese
- OT – Other
- RU – Russian
- SL – Sign Language
- SP – Spanish
- VN – Vietnamese

3.7 INTERVIEWS

Except for households certified for longer than 12 months, households must have a face-to-face interview or telephone interview with an eligibility worker at initial certification and a face-to-face or telephone interview at least once every 12 months thereafter. Interviews may be conducted by phone, at the SNAP office or other mutually acceptable location, including a household's residence. If the interview will be conducted at the household's residence, it must be scheduled in advance with the household. If a household in which all adult members are elderly or disabled with no earned income is certified for 24 months, a face-to-face interview or telephone interview is at recertification.

The individual interviewed may be the applicant (PI), spouse, other responsible member of the household, or an authorized representative. The applicant may bring any person he or she chooses to the interview.

The interviewer must not simply review the information that appears on the application, but must explore and resolve with the household unclear and incomplete information.

The household must be advised:

- of their rights and responsibilities during the interview, including the appropriate application processing standard and the households' responsibility to report changes;
- that time limits and other requirements that apply to the receipt of FI benefits do not apply to the receipt of SNAP benefits; and
- households which cease receiving FI benefits because they have reached a time limit, have begun working, or for other reasons, may still qualify for SNAP benefits.

The interview must be conducted as an official and confidential discussion of household circumstances. The Agency must protect the applicant's right to privacy during the interview. Facilities must be adequate to preserve the privacy and confidentiality of the interview.

The Agency must notify the applicant that it will waive the face-to-face interview in favor of a telephone interview on a case-by-case basis because of household hardship situations as determined by the Agency. These hardship conditions include, but are not limited to:

- illness,
- transportation difficulties,
- care of a household member,
- hardships due to residency in a rural area,
- prolonged severe weather, or
- work or training hours which prevent the household from participating in an in-office interview.

The Agency must document the case file to show when a waiver was granted because of a hardship. The Agency may also waive the face-to-face interview in favor of a telephone interview for all households which have no earned income and all members of the household are elderly or disabled.

Note: Under waiver authority, SC may conduct all interviews by phone without specific documentation of hardship.

Waiver of the face-to-face interview does not exempt the household from the verification requirements. Waiver of the face-to-face interview will not affect the length of the household's certification period.

Procedure:
All initial applications, reapplications, and annual recertifications must be registered in CHIP. Upon registration, a system generated notice will be sent to the client advising the client to call the Interview Center for a telephone interview. A date set ten days out from the registration date will be automatically entered on CHIP screen INRD in the INTERVIEW DATE field. When the client calls the Interview Center, the interviewer should conduct the interview and acknowledge the completion of the interview by coding CHIP Screen INRD with a "Y" in the interview completed field and updating the INTERVIEW DATE field with the actual date that the interview was completed.

If the client does not call the Interview Center within ten days or if the interview is not acknowledged with a "Y" in the INTERVIEW COMPLETED field on INRD by the tenth day, a Notice of Missed Interview (NOMI) will be sent to the client.

For households that have failed to appear for an interview or were not able to be reached for the scheduled telephone interview, the Agency must notify the household that it missed the interview and that the household is responsible for rescheduling the missed interview. **If the household contacts the Agency within the 30 day processing period, the Agency must schedule a second interview.**

The Agency must grant a face-to-face interview to any household which requests one.

3.8 HOUSEHOLD COOPERATION WITH SNAP QUALITY CONTROL (QC) REVIEWER

The household will be determined ineligible if it refuses to cooperate in any subsequent review of its eligibility as a part of a SNAP QC review. If a household is terminated for refusal to cooperate with a quality control reviewer, the household may reapply, but will not be determined eligible until it cooperates with the QC reviewer. If a household terminated for refusal to cooperate with a State QC reviewer reapplies after 95 days from the end of the annual review period, the household will not be determined ineligible for its refusal to cooperate with a State QC reviewer during the completed review period, but must provide verification in accordance with **Chapter 5 Verification.**

If a household terminated for refusal to cooperate with a Federal QC reviewer reapplies after seven months from the end of the annual review period, the household will not be determined ineligible for its refusal to cooperate with a Federal QC reviewer during the completed review period, but must provide verification in accordance with **Chapter 5 Verification.**

3.9 VOTER REGISTRATION REQUIREMENTS

The National Voter Registration Act (NVRA) requires that voter registration services be provided to all SNAP applicants and recipients at application, recertification, and when a change of address is reported.

These services include:

- Distributing voter registration forms;
- Providing assistance in completing voter registration forms;
- Completing registration via CHIP System for clients desiring to vote;
- Transmitting completed voter registration forms to the local Election Commission office; and/or
- Offering State of South Carolina Voter Registration By Mail Applications to clients desiring to register to vote who do not want the agency to register them electronically.
  NOTE: These applications are not DSS forms; therefore they must be downloaded from the South Carolina Election Commission's Website at http://www.scvotes.org

Local county DSS offices will send any paper registration forms received weekly (or as scheduled) to the local Election Commission.

When providing voter registration services, the Agency must not:

- Seek to influence an individual's political preference or party registration;
- Express or display any political or party allegiance;
- Discourage the individual in any manner from registering to vote; or
- Indicate or imply that registration or non-registration will influence the availability or amount of Agency assistance or SNAP benefits.

Procedure

At initial application and at recertification (annual), the interviewer should ask the client if he/she is registered to vote and record the answer in the appropriate spot on the documentation tool. If the client is not registered to vote, the following should occur:

1. If PI is not registered to vote, the interviewer should ask the client if he/she wants to register to vote.

2. If the PI indicates that he does not wish to register, CHIP Screen ADDR should be coded "D", declined to register.

3. If the PI indicates that he does wish to register, the interviewer will inform the client that:

- DSS can register the client to vote (worker should offer to register the client during the interview)
- Or if the client does not want DSS to register them to vote, DSS can mail the client a South Carolina Voter Registration – Mail Application (which the interviewer can locate at the website: http://www.SCvotes.org since this is not a DSS form).

4. CHIP screen ADDR should be coded "A" (registering) if the client indicates that he/she wishes DSS to register them to vote. No further action is necessary by the worker. Registration information will be transmitted electronically to the Election Commission.

   CHIP screen ADDR should be coded "C" (registration by mail given) if the client indicates that he/she wishes to complete the mail in registration form to register to vote. The interviewer must mail the Voter Registration application to the client for completion.

Chapter 4

Chapter 4 Categorically Eligible Households

For purposes of this chapter, the Agency will be referred to as SCDSS to avoid confusion with Social Security Administration (SSA), the agency responsible for administering Supplemental Security Income (SSI)

4.1 CATEGORICALLY ELIGIBLE HOUSEHOLDS

The following households are categorically eligible for SNAP:

(A) Any household in which all members receive or are authorized to receive cash through the Family Independence Program (TANF)
(B) Any household in which all members receive or are authorized to receive SSI benefits.

NOTE: Residents of public institutions who apply jointly for SSI and SNAP benefits prior to their release from the institution are not categorically eligible upon a finding by SSA of potential SSI eligibility prior to such release. SCDSS must consider the individuals categorically eligible at such time as SSA makes a final SSI eligibility and the institution has released the individual.

(C) Any household in which all members receive or are authorized to receive Family Independence (TANF) and/or SSI benefits.
(D) Categorical eligibility is expanded to include all households in which any member receives, or is authorized to receive, benefits from Family Independence Information and Referral Services. Family Independence Information and Referral Services are provided to households whose income falls at or below 130% of the federal poverty level (FPL). Expanded categorical eligible households through Family Independence Information and Referral Services will have the household's resources excluded when determining eligibility for SNAP benefits. These households must meet the non-financial eligibility criteria but are not subject to gross or net income limits. Categorical eligibility for these households does not continue if gross income, upon verification, is above the identified FPL.

For purposes of this section, "authorized to receive" means that an individual has been determined eligible for benefits and has been notified of this determination, even if the benefits have been authorized but not received, authorized but not accessed, suspended or recouped, or not paid because they are less than a minimum amount.

Categorical eligibility cannot be extended to any household that is not eligible to participate in the SNAP because the entire household is institutionalized or disqualified.

4.2 HOUSEHOLDS PROHIBITED FROM BEING CONSIDERED CATEGORICALLY ELIGIBLE

A household will not be considered categorically eligible if:

(A) Any member of that household is disqualified for an intentional SNAP violation in accordance with **Chapter 20 Disqualification for Intentional Program Violation (IPV);**
(B) The primary informant is disqualified for failure to comply with the work requirements in accordance with **Section 8.1 Work Requirements.**
(C) Any member of that household is ineligible by virtue of a conviction for a drug-related felony.

These households are subject to all SNAP eligibility and benefits provisions and cannot be reinstated in the SNAP on the basis of categorical eligibility provisions.

Exception: Expanded categorical eligibility through Family Independence Information and Referral Services are available to all eligible households, including those that contain an ineligible or disqualified member. Households that contain a member who is sanctioned continue to be eligible to receive Family Independence Information and Referral Services so resources are excluded and not deemed. The sanctioned SNAP member's income continues to be deemed.

4.3 INDIVIDUALS PROHIBITED FROM BEING CONSIDERED CATEGORICALLY ELIGIBLE

No person will be included as a member in any household which is otherwise categorically eligible if that person is:

(A) An ineligible alien as defined in **Section 7.3 Alien Eligibility**;
(B) Ineligible under the student provisions in **Section 7.4 Students**;
(C) Disqualified for failure to provide or apply for an SSN as defined **Section 7.2 Social Security Numbers (SSN's);**
(D) Institutionalized in a nonexempt facility;
(E) Ineligible because of failure to comply with a work requirement of **Section 8.1 Work Requirements**.

NOTE: For the purposes of work registration, the exemptions in* Section 8.2 Exemptions from Work Requirements *will be applied to individuals in categorically eligible households. Any such individual

who is not exempt from work registration is subject to the other work requirements in **Section 8.1 Work Requirements.**

(F) Disqualified for intentional program violation, as required by Chapter 20 Disqualification for Intentional Program Violation (IPV);
(G) Refusing to cooperate in providing information to the Agency that is necessary for making a determination of its eligibility or for completing any subsequent review of its eligibility; or
(H) The household is ineligible under the striker provisions of **Section 2.4 Strikers.**

These individuals are subject to all SNAP eligibility and benefits provisions and cannot be reinstated in the SNAP on the basis of categorical eligibility provisions.

4.4 DETERMINING CATEGORICALLY ELIGIBLE HOUSEHOLDS

Individuals authorized to receive Family Independence (TANF) or SSI benefits but who have not yet received payment are considered recipients of benefits from those programs. In addition, individuals are considered recipients of Family Independence (TANF) or SSI if their Family Independence (TANF) or SSI benefits are suspended or recouped. Individuals entitled to Family Independence (TANF) or SSI benefits but who are not paid such benefits because the grant is less than a minimum benefit are also considered recipients. SCDSS will not consider as recipients those individuals not receiving Family Independence (TANF) or SSI benefits who are entitled to Medicaid only.

Eligibility for expanded categorical eligibility through Family Independence Information and Referral Services will be determined prior to SNAP eligibility determination. The applicant's statement of gross income is accepted to initially establish eligibility for Family Independence Information and Referral Services. Signature of the SNAP applicant who makes initial application in person, including those who are also applying for Family Independence (TANF), will be obtained on the DSS Form 3800, acknowledging notification of eligibility for Family Independence Information and Referral Services. Family Independence Information and Referral Services brochures will be available to these households. SNAP certification workers will discuss Family Independence Information and Referral Services with applicants whose SNAP application is received through the mail, facsimile, or through the internet. Family Independence Information and Referral Services brochures will be mailed to the household upon request.

In determining whether a household is categorically eligible, SCDSS will verify that each member receives Family Independence (TANF) or SSI benefits and that it includes no individuals who have been disqualified as provided in **Section 4.2 Households Prohibited from Being Considered Categorically Eligible** **or** **Section 4.3 Individuals Prohibited from Being Considered Categorically Eligible**.

SCDSS will also verify household composition if it is questionable, in accordance with **Chapter 5, Supplemental Nutrition Assistance Program: Verification,** in order to determine that the household meets the definition of a household in **Section 2.1 General Household Definitions.**

In order to determine if a household will be eligible due to its status as a recipient Family Independence (TANF) or SSI household, SCDSS may temporarily postpone, within the 30-day processing standard, the SNAP eligibility determination if the household is not entitled to expedited service and appears to be categorically eligible. However, SCDSS will postpone denying a potentially categorically eligible household until the 30th day in case the household is determined eligible to receive Family Independence (TANF) or SSI benefits.

SCDSS will ensure that the denied application of a potentially categorically eligible household is easily retrievable. For a household filing a joint application for SNAP and Family Independence (TANF) or SSI benefits (or has a Family Independence (TANF) or SSI application pending) and is denied SNAP benefits but is later determined eligible to receive such benefits and is otherwise categorically eligible, SCDSS will provide SNAP benefits using the original application and any other pertinent information occurring subsequent to that application. Benefits shall be paid from the beginning of the period for which Family Independence (TANF) or SSI benefits are paid or the original SNAP application date, whichever is later.

Exception: Residents of public institutions may apply jointly for SSI and SNAP benefits prior to their release from a public institution.

In situations where the SCDSS must update and reevaluate the original application of a denied case, SCDSS will not re-interview the household, but will use any available information to update the application.

SCDSS will then contact the household by phone or mail to explain and confirm changes made and to determine if other changes in household circumstances have occurred.

If any information obtained from the household differs from that which SCDSS obtained from available information or the household provided additional changes in information, SCDSS will arrange for the household or its authorized representative to initial all changes, re-sign and date the updated application and provide necessary verification.

SCDSS will not require households which file a joint Family Independence (TANF) or SSI and SNAP application and whose Family Independence (TANF) or SSI applications are denied to file new SNAP applications. Rather, SCDSS must determine or continue their SNAP eligibility on the basis of the original applications filed jointly.

In addition, SCDSS must use any other documented information obtained subsequent to the application which may have been used in the Family Independence (TANF) or SSI determination and which is relevant to SNAP eligibility or level of benefits.

4.5 FAMILY INDEPENDENCE (FI) APPLICANT HOUSEHOLDS

SCDSS must notify households applying for Family Independence (TANF) of their right to apply for SNAP benefits at the same time and must allow them to apply at the same time they apply for Family Independence (TANF) benefits. SCDSS must also notify such households that time limits or other requirements that apply to the receipt of Family Independence (TANF) benefits do not apply to the receipt of SNAP benefits, and that households which cease receiving Family Independence (TANF) benefits because they have reached a time limit, have begun working, or for other reasons, may still qualify for SNAP benefits.

If SCDSS attempts to discourage households from applying for Family Independence (TANF) it will make clear that the disadvantages and requirements of applying for Family Independence (TANF) do not apply to SNAP and will encourage applicants to continue with their application for SNAP. SCDSS will inform households that receiving SNAP benefits will have no bearing on any other program's time limits that may apply to the household.

SCDSS will process the applications of applicant Family Independence (TANF) households in accordance with the requirements of the SNAP and must base their eligibility solely on SNAP eligibility criteria unless the household is categorically eligible, as provided in **Section 4.1 Categorically Eligible Households**.

SCDSS will base the benefit levels of all households solely on SNAP criteria.

SCDSS must certify jointly processed and categorically eligible households in accordance with SNAP procedural, timeliness, and notice requirements, including the 7-day expedited service provisions of **Section 6.5 Entitlement to Expedited Service** and normal 30-day application processing standards of **Section 6.1 Normal Processing Standards**.

To file a joint Family Independence (TANF) /SNAP application, the household would use the:

(1) DSS Form 3800, Application for Family Independence, Food Stamps and Other DSS Assistance;

NOTE: The DSS Form 1667, Client Information Questionnaire, may be used in conjunction with the DSS Form 3800 to obtain information.

(2) DSS Form 3800 A, Your Rights and Responsibilities;

SCDSS will conduct a single interview at initial application, whenever possible, for both TANF and SNAP purposes. A household's eligibility for SNAP out-of-office interview provisions in **Section 3.7 Interviews** does not relieve the household of any responsibility for a face-to-face interview to be certified for Family Independence (TANF).

For households applying for both Family Independence (TANF) and SNAP, SCDSS must follow the verification procedures described in **Chapter 5, Supplemental Nutrition Assistance Program: Verification** for those factors of eligibility which are needed solely for purposes of determining the household's eligibility for SNAP. For those factors of eligibility which are needed to determine both Family Independence (TANF) eligibility and SNAP eligibility, SCDSS will use the Family Independence (TANF) verification rules. However, if the household has provided SCDSS sufficient verification to meet the verification requirements of **Chapter 5, Supplemental Nutrition Assistance Program: Verification,** but has failed to provide sufficient verification to meet the Family Independence (TANF) verification rules, SCDSS cannot use such failure as a basis for denying the household's SNAP application or failing to comply with SNAP processing requirements. Under these circumstances, SCDSS must process the household's SNAP application and determine eligibility based on its compliance with the requirements of **Chapter 5, Supplemental Nutrition Assistance Program: Verification.**

SCDSS will not require a household which files a joint Family Independence (TANF) /SNAP application and whose Family Independence (TANF) application is denied to file a new SNAP application. Rather, SCDSS must determine or continue their SNAP eligibility on the basis of the original application filed jointly for Family Independence (TANF) and SNAP purposes.

In addition, SCDSS must use any other documented information obtained subsequent to the application which may have been used in the Family Independence (TANF) determination and which is relevant to SNAP eligibility or level of benefits.

4.6 APPLICANT SUPPLEMENTAL SECURITY INCOME (SSI) HOUSEHOLDS

For purposes of this policy, SSI is defined as Federal SSI payments made under title XVI of the Social Security Act, federally administered optional supplementary payments under section 1616 of that Act, or federally administered mandatory supplementary payments made under section 212(a) of Pub. L. 93–66.

Households applying simultaneously for SSI and SNAP benefits will be subject to SNAP eligibility criteria, and benefit levels shall be based solely on SNAP eligibility criteria until the household is considered categorically eligible.

Whenever a member of a household consisting only of SSI applicants or recipients transacts business at an SSA office, the SSA will inform the household of its right to apply for SNAP benefits at the SSA office without going to the appropriate SCDSS office and its right to apply at a SCDSS office if it chooses to do so.

SSA will accept and complete SNAP applications received at the SSA Office from SSI households and forward them, within one working day after receipt of a signed application, to a

designated SCDSS office. The SSA will use either the national SNAP application form for joint processing or the Agency's SNAP application.

SCDSS will make an eligibility determination and issue SNAP benefits to eligible SSI households within 30 days following the date the application was received by the SSA. Applications shall be considered filed for normal processing purposes when the signed application is received by SSA. The expedited processing time standards shall begin on the date SCDSS receives a SNAP application. SNAP applications and supporting documentation sent to an incorrect local SCDSS office shall be sent to the correct office within one working day of their receipt in accordance with **Section 3.3 Filing an Application for Supplemental Nutrition Assistance Program (SNAP), (2) Contacting the SNAP Office.**

SCDSS will make an eligibility determination and issue SNAP benefits to a resident of a public institution who applies jointly for SSI and SNAP benefits within 30 days following the date of the applicant's release from the institution.

Expedited processing time standards for an applicant who has applied for SNAP benefits and SSI prior to release will also begin on the date of the applicant's release from the institution in accordance with **Section 6.6 Processing Standards for Expedited Service**.

SSA shall notify SCDSS of the date of release of the applicant from the institution. If, for any reason, SCDSS is not notified on a timely basis of the applicant's release date, the Agency will restore benefits to such applicant back to the date of release.

If applying at the SSA office, households in which all members are applying for or participating in SSI will not be required to see a SCDSS eligibility worker, or otherwise be subjected to an additional interview at SCDSS. The SNAP application will be processed by SCDSS who will not contact the household further in order to obtain information for certification for SNAP benefits unless:

- the application is improperly completed;
- mandatory verification required by **Section 5.1 Verification Prior to Certification** is missing; or,
- SCDSS determines that certain information on the application is questionable.

In no event would the applicant be required to appear at the SCDSS office to finalize the eligibility determination.

4.7 ELIGIBILITY FACTORS FOR CATEGORICALLY ELIGIBLE HOUSEHOLDS

The eligibility factors which are deemed for SNAP eligibility without the verification required in **Chapter 5, Supplemental Nutrition Assistance Program: Verification** because of Family Independence (TANF) /SSI status are;

- resources;
- gross and net income limits;
- social security number (SSN) information,
- sponsored alien information, and
- residency.

SCDSS must collect and verify factors relating to benefit determination that are not collected and verified by the other program if these factors are required to be verified under **Chapter 5, Supplemental Nutrition Assistance Program: Verification**. If any of the following factors are questionable, the Agency must verify, in accordance **Chapter 5, Supplemental Nutrition Assistance Program: Verification**, that the household which is considered categorically eligible:

(A) Contains only members that are Family Independence (TANF) or SSI recipients;
(B) Meets the household definition in **Section 2.1 General Household Definitions;**
(C) Includes all persons who purchase and prepare food together in one SNAP household regardless of whether or not they are separate units for Family Independence (TANF) or SSI purposes; and
(D) Includes no persons who have been disqualified as provided for in **Section 4.2 Households Prohibited from Being Considered Categorically Eligible.**

Exception: Expanded categorical eligibility through Family Independence Information and Referral Services are available to all households, including those that contain an ineligible or disqualified member. Households that contain a member who is sanctioned continue to be eligible to receive Family Independence Information and Referral Services so resources are excluded and not deemed. The sanctioned SNAP member's income continues to be deemed.

Categorical eligibility will be assumed at recertification in the absence of a timely Family Independence (TANF) or SSI redetermination.

4.8 DEEMED ELIGIBILITY FACTORS FOR CATEGORICALLY ELIGIBLE HOUSEHOLDS

When determining eligibility for a categorically eligible household, all SNAP requirements apply except the following:

- Resources;
- Gross and net income limits;
- Social security number (SSN) information;
- Sponsored alien information;
- Residency; and
- Zero benefit households. All eligible households of one or two persons must be provided the minimum benefit, as required by **Section 13.6 Calculating Net Income and Benefit Levels.**

Expanded categorical eligible households through Family Independence Information and Referral Services will have the household's resources excluded when determining eligibility for SNAP benefits. These households must meet the non-financial eligibility criteria but are not subject to gross or net income limits. Categorical eligibility for these households does not continue if gross income, upon verification, is above the identified FPL.

4.9 SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP)

SCDSS operates the South Carolina Combined Application Project for one person SNAP households determined categorically eligible due to their receipt of SSI benefits. The policy and procedures for this project are defined in **Chapter 19 Federal Demonstration Projects.**

Chapter 5

Chapter 5 Verification

5.1 VERIFICATION PRIOR TO CERTIFICATION

The Agency will verify the following information prior to certification for households initially applying:

(1) Identity

The identity of the person making application will be verified. Where an authorized representative applies on behalf of a household (**Section 3.5 Authorized Representatives**), the identity of both the authorized representative and the primary informant will be verified. Identity may be verified through readily available documentary evidence, or if this is unavailable, through a collateral contact (**Section 5.2 Sources of Verification, (2) *Collateral Contacts***). Examples of acceptable documentary evidence which the applicant may provide include, but are not limited to, a driver's license, a work or school ID, an ID for health benefits or for another assistance or social services program, a voter registration card, wage stubs, or a birth certificate. Examples of acceptable collateral contacts are phone call to landlord, friend or neighbor. Any documents or oral contacts which reasonably establish the applicant's identity must be accepted, and no requirement for a specific type of document will be imposed.

(2) Residency

The residency requirements of **Section 7.1 Residency** will be verified except in unusual cases (such as homeless households or migrant farm worker households) where verification of residency cannot reasonably be accomplished. Verification of residency should be accomplished to the extent possible in conjunction with the verification of other information such as, but not limited to, rent and mortgage payments, utility expenses, and identity.

Any documents or collateral contact (**Section 5.2 Sources of Verification, (2) *Collateral Contacts***) which reasonably establishes the applicant's residency must be accepted and no requirement for a specific type of verification will be imposed. No durational residency requirement shall be established.

(3) Social security numbers

The Agency will verify the social security number(s) (SSN's) reported by the household by submitting them to the Social Security Administration (SSA) for verification according to automated enumeration procedures established by SSA. See **Section 7.2 Social Security Numbers.** The Agency will not delay the certification for or issuance of benefits to an otherwise eligible household solely to verify the SSN of a household member. Once an SSN has been verified, the Agency will make a permanent annotation to its file to prevent the unnecessary re-verification of the SSN in the future.

If an individual is unable to provide an SSN or does not have an SSN, the State agency shall require the individual to submit Form SS–5, Application for a Social Security Number, to the SSA in accordance with procedures in **Section 7.2 Social Security Numbers.** A completed SSA Form 2853 will be considered proof of application for an SSN for a newborn infant. The Agency will accept as verified an SSN which has been verified by another program participating in the IEVS.

(4) Household composition

The Agency will verify factors affecting the composition of a household, if questionable. Individuals who claim to be a separate household from those with whom they reside will be responsible for proving that they are a separate household to the satisfaction of the Agency.

(5) Disability

The Agency will verify disability as follows:

A. For individuals to be considered disabled who: • **receive supplemental security income (SSI) benefits under title XVI of the Social Security Act or disability or blindness payments under titles I, II, X, XIV, or XVI of the Social Security Act;** • **receive federally or State-administered supplemental benefits under section 1616(a) of the Social Security Act provided that the eligibility to receive the benefits is based upon the disability or blindness criteria used under title XVI of the Social Security Act;** • **receive federally or State-administered supplemental benefits under section 212(a) of Pub. L. 93–66;**	**The certification worker may use SDX; or** **The household may provide proof that the disabled individual is receiving benefits under titles I, II, X, XIV or XVI of the Social Security Act.**

B. For an individual to be considered disabled who • **is a veteran with a service-connected or non-service-connected disability rated by the Veteran's Administration (VA) as total or paid as total by the VA under title 38 of the United States Code;**	**The household must present a statement from the Veterans Administration (VA) which clearly indicates that the disabled individual is receiving VA disability benefits for a service-connected or non-service-connected disability and that the disability is rated as total or paid at the <u>total</u> rate by VA.**
C. For an individual to be considered disabled who: • **is a veteran considered by the VA to be in need of regular aid and attendance or permanently housebound under title 38 of the United States Code; or** • **is a surviving spouse of a veteran and considered by the VA to be in need of regular aid and attendance or permanently housebound or a surviving child of a veteran and considered by the VA to be permanently incapable of self-support under title 38 of the United States Code;**	**Proof by the household that the disabled individual is receiving VA disability Aid and Attendance benefits is sufficient verification of disability.**
D. For an individual to be considered disabled who: • **receives disability retirement benefits from a governmental agency because of a disability considered permanent under section 221(i) of the Social Security Act; or** • **is a surviving spouse or surviving child of a veteran and considered by the VA to be entitled to compensation for a service-connected death or pension benefits for a non-service-connected death under title 38 of the United States Code and has a disability considered permanent under section 221(i) of the Social Security Act. "Entitled" as used in this definition refers to those veterans' surviving spouses and surviving children who are receiving the compensation or pension benefits stated or have been approved for such payments, but are not yet receiving them;**	**The certification worker may use BDX, or use the Social Security Administration's (SSA) most current list of disabilities considered permanent under the Social Security Act for verifying disability. This list is provided in Tool Kit 3 If it is obvious to the caseworker that the individual has one of the listed disabilities, the household will be considered to have verified disability. If disability is not obvious to the caseworker, the household will provide a statement from a physician or licensed or certified psychologist certifying that the individual has one of the non-obvious disabilities listed.**

E. For individuals to be considered disabled who receives an annuity payment under: • **section 2(a)(1)(iv) of the Railroad Retirement Act of 1974 and is determined to be eligible to receive Medicare by the Railroad Retirement Board; or** • **section 2(a)(1)(v) of the Railroad Retirement Act of 1974 and is determined to be disabled based upon the criteria used under title XVI of the Social Security Act.**	**The household will provide proof that the individual receives a Railroad Retirement disability annuity from the Railroad Retirement Board and has been determined to qualify for Medicare.**
F. For an individual to be considered disabled who: • **is a recipient of interim assistance benefits pending the receipt of Supplemented Security Income (SSI) or a recipient of disability related medical assistance under title XIX of the Social Security Act;**	**The household will provide proof that the individual receives interim assistance benefits pending the receipt of Supplemental Security Income (SSI) or disability-related medical assistance under title XIX (Medicaid) of the SSA.**

When making the disability determination for some individuals specified above, the Agency must use criteria for permanent disability established by the Social Security Act. See **SNAP Tool Kit Attachment 3: Permanent Disability Established by the Social Security Act.**

(6) Alien eligibility

The Agency must verify the eligible status of applicant aliens. Household members applying for SNAP are required to provide their INS documentation as a condition of eligibility. The Agency is then required to verify the validity of these documents through the Systematic Alien Verification for Entitlements (SAVE) database.

Note: When the automated check cannot verify the documents or when there is a significant discrepancy between the automated data and the information provided by the applicant/recipient, the Agency must verify the validity of that documentation by submitting INS form G-845 (Document Verification Request) to the INS with attached photocopies of the documentation. This form can be obtained from the US Citizenship and Immigration website at www.uscis.gov/g-845.

If an alien does not wish the Agency to contact INS to verify his or her immigration status, the Agency must give the household the option of withdrawing its application or participating without that member.

For acceptable sources of verification that may be used in along with SAVE see **SNAP Tool Kit Attachment 4: Acceptable Verification of Alien Eligibility.** For a description of citizens and noncitizens who may be eligible to participate in SNAP see **Section 7.3 Citizenship and**

Alien Status. The SSA Quarters of Coverage History System (QCHS) is available for purposes of verifying whether a lawful permanent resident has earned or can receive credit for a total of 40 qualifying quarters. However, the QCHS may not show all qualifying quarters. For instance, SSA records do not show current year earnings and in some cases the last year's earnings, depending on the time of request. Also, in some cases, an applicant may have work from uncovered employment that is not documented by SSA, but is countable toward the 40 quarters test. In both these cases, the individual, rather than SSA, would need to provide the evidence needed to verify the quarters.

The Agency must accept participation in another program as acceptable verification if verification of citizenship or non-citizen national status was obtained for that program.

An alien is ineligible until acceptable documentation is provided unless:

- The Agency has submitted a copy of a document provided by the household to INS for verification. Pending such verification, the Agency cannot delay, deny, reduce or terminate the individual's eligibility for benefits on the basis of the individual's immigration status; or
- The applicant or the Agency has submitted a request to SSA for information regarding the number of quarters of work that can be credited to the individual, SSA has responded that the individual has fewer than 40 quarters, and the individual provides documentation from SSA that SSA is conducting an investigation to determine if more quarters can be credited. If SSA indicates that the number of qualifying quarters that can be credited is under investigation, the Agency must certify the individual pending the results of the investigation for up to 6 months from the date of the original determination of insufficient quarters; or
- The applicant or the Agency has submitted a request to a Federal agency for verification of information which bears on the individual's eligible alien status. The State agency must certify the individual pending the results of the investigation for up to 6 months from the date of the original request for verification.

The Agency must provide alien applicants with a reasonable opportunity to submit acceptable documentation of their eligible alien status as of the 30th day following the date of application.

A reasonable opportunity must be at least 10 days from the date of the Agency's request for an acceptable document. When the Agency fails to provide an alien applicant with a reasonable opportunity as of the 30th day following the date of application, the Agency must provide the household with benefits no later than 30 days following the date of application, provided the household is otherwise eligible.

Absent verification or third party attestation of U.S. citizenship or non-citizen national status, the member whose citizenship or non-citizen national status is in question is ineligible to participate until the issue is resolved and will have his or her income and resources considered available to any remaining household members as set forth in **Section 14.1 Treatment of Income and Resources of Certain Non-household Members.**

(7) Gross nonexempt income

Gross nonexempt income shall be verified for all households prior to certification. However, where all attempts to verify the income have been unsuccessful because the person or organization providing the income has failed to cooperate with the household and the Agency, and all other sources of verification are unavailable, the eligibility worker will determine an amount to be used for certification purposes based on the best available information.

(8) Shelter/Utility expenses

The Agency will verify a household's shelter expenses, which includes rent, mortgage, property tax on the residence, and home owner's insurance. The Agency will verify a household's utility expenses to determine that the household incurs a heating or cooling expense as specified in **Section 12.5 Utility Allowances** and is entitled to the Mandatory Utility Allowance (MUA).

If the household wishes to claim expenses for an eligible unoccupied home, the Agency will verify the household's actual shelter and utility expenses for the unoccupied home and will not use the MUA.

If the expense cannot be verified within 30 days of the date of application, the Agency will determine the household's eligibility and benefit level without providing a deduction of the unverified expense. If the household subsequently provides the missing verification, the Agency will re-determine the household's benefits, and provide increased benefits, if any, in accordance with the timeliness standards in **Chapter 15 Change Reporting Requirements** on reported changes. If the expense could not be verified within the 30-day processing standard because the Agency failed to allow the household sufficient time, as defined **Section 6.4 Delays in Processing**, to verify the expense, the household shall be entitled to the restoration of benefits retroactive to the month of application. If the household would be ineligible unless the expense is allowed, the household's application shall be handled as provided in **Section 6.4 Delays in Processing**.

(9) Medical expenses

The amount of any outstanding non-recurring medical expenses (including the amount of reimbursements) deductible under **Section 12.8 ~~Excess~~ Medical Deduction** will be verified prior to initial certification, as well as any recurring expenses. When calculating recurring expenses, use the anticipated monthly average. When calculating non-recurring medical expenses, the amount of out-of-pocket medical expenses should be prorated over the certification period. Verification of other factors, such as allowing services provided or the eligibility of the person incurring the cost, will be required if questionable. The household may be eligible for the Standard Medical Deduction or the Excess Medical Deduction. When the household verifies out-of-pocket medical expenses that total more than $35.00 but do not exceed $210.00 per month, the Standard Medical Deduction must be allowed. When the household verifies out-of-pocket medical expenses that total more than $210.00 per month, the Excess Medical Deduction must be allowed.

Notes:

- A reimbursement is the amount of medical expenses initially paid on behalf of the patient but is refunded by the health insurance company.
- An out-of-pocket medical expense is the amount the household is required to pay. If the household has insurance coverage, this amount will be what the household owes after the insurance company has paid its portion of the expense.

For deductible expenses **(8)** ***Shelter/Utility expenses*** and **(9)** ***Medical expenses***, if the Agency opts to verify a deductible expense and obtaining the verification may delay the household's certification, the Agency will advise the household that its eligibility and benefit level may be determined without providing a deduction for the claimed but unverified expense.

If the expense cannot be verified within 30 days of the date of application, the Agency will determine the household's eligibility and benefit level without providing a deduction of the unverified expense. If the household subsequently provides the missing verification, the Agency will re-determine the household's benefits, and provide increased benefits, if any, in accordance with the timeliness standards in **Chapter 15 Change Reporting Requirements** on reported changes.

Note: Prorate the nonrecurring medical expense amount over the months remaining in the certification period, if the household provides the previously requested verification.

If the expense could not be verified within the 30-day processing standard because the Agency failed to allow the household sufficient time, as defined **Section 6.4 Delays in Processing**, to verify the expense, the household shall be entitled to the restoration of benefits retroactive to the month of application. If the household would be ineligible unless the expense is allowed, the household's application shall be handled as provided in **Section 6.4 Delays in Processing**.

See 5.7 Verification Subsequent to Initial Certification for treatment of ongoing cases.

(10) Legal obligation and actual child support payments

The Agency will obtain verification of the household's legal obligation to pay child support, the amount of the obligation, and the monthly amount of child support the household actually pays.

NOTE: Documents that are accepted as verification of the household's legal obligation to pay child support are not to be accepted as verification of the household's actual monthly child support payments.

(11) Other factors determined to be questionable

The Agency will verify, prior to certification of the household, all other factors of eligibility which the Agency determines are questionable and affect the household's eligibility and benefit level. Verification cannot be prescribed based on race, religion, ethnic background, or national origin.

5.2 SOURCES OF VERIFICATION

(1) Documentary evidence

Documentary evidence consists of a written confirmation of a household's circumstances. Examples of documentary evidence include wage stubs, rent receipts, and utility bills.

Although documentary evidence will be the primary source of verification, acceptable verification will not be limited to any single type of document and may be obtained through the household or other source.

Whenever documentary evidence cannot be obtained or is insufficient to make a firm determination of eligibility or benefit level, the certification worker may require collateral contacts (**Section 5.2 Sources of Verification, (2) *Collateral Contacts***) or home visits.

(2) Collateral contacts

A collateral contact is an oral confirmation of a household's circumstances by a person outside of the household. The collateral contact may be made either in person or over the telephone. The Agency may select a collateral contact if the household fails to designate one or designates one which is unacceptable to the Agency.

Examples of acceptable collateral contacts may include employers, landlords, social service agencies, migrant service agencies, and neighbors of the household who can be expected to provide accurate third-party verification.

The Agency, generally, will rely on the household to provide the name of any collateral contact. The household may request assistance in designating a collateral contact. The Agency is not required to use a collateral contact designated by the household if the collateral contact cannot be expected to provide accurate third-party verification. When the collateral contact designated by the household is unacceptable, the Agency will either designate another collateral contact, ask the household to designate another collateral contact or to provide an alternative form of verification, or substitute a home visit. The Agency is responsible for obtaining verification from acceptable collateral contacts.

NOTE: When talking with collateral contacts, the Agency will disclose only the information that is absolutely necessary to get the information being sought. The Agency will avoid disclosing that the household applied for SNAP, nor should the Agency disclose any information supplied by the household, or suggest that the household is suspected of any wrong doing.

(3) Home visits

Home visits may be used as verification only when documentary evidence is insufficient to make a firm determination of eligibility or benefit level, or cannot be obtained, and the home visit is scheduled in advance with the household.

Home visits are to be used on a case-by-case basis where the supplied documentation is insufficient. Simply because a household fits a profile of an error-prone household does not constitute lack of verification.

5.3 DISCREPANCIES IN VERIFICATION

Where unverified information from a source other than the household contradicts statements made by the household, the household shall be afforded a reasonable opportunity to resolve the discrepancy prior to a determination of eligibility or benefits. The Agency may verify the information directly and contact the household only if such direct verification efforts are unsuccessful.

5.4 RESPONSIBILITY FOR OBTAINING VERIFICATION

The household has primary responsibility for providing documentary evidence to support statements on the application and to resolve any questionable information. Households may supply documentary evidence in person, through the mail, by facsimile or other electronic device, or through an authorized representative. The Agency must not require the household to present verification in person at the SNAP office. The Agency must accept any reasonable documentary evidence provided by the household and must be primarily concerned with how adequately the verification proves the statements on the application.

In cases where verification is incomplete, the Agency must provide the household with a statement of required verification, offer to assist the household in obtaining verification if the household indicates assistance is needed, and allow the household sufficient time to provide the missing verification. Sufficient time shall be at least 10 days from the date of the Agency's initial request for the particular verification that was missing. The household must receive an opportunity to participate, if eligible, within five (5) working days after the household provides the missing verification.

5.5 INCOME VERIFICATION ELIGIBILITY SYSTEM (IEVS)/ STATE ELIGIBILITY VERIFICATION SYSTEM (SVES)

The Agency may verify SSI benefits through the State Data Exchange (SDX), and Social Security benefit information through the Beneficiary Data Exchange (BENDEX).

The household will be given an opportunity to verify the information from another source if the SDX or BENDEX information is contradictory to the information provided by the household or is unavailable. Determination of the household's eligibility and benefit level shall not be delayed past the application processing time standards of **Section 6.1 Normal Processing Standards** if SDX or BENDEX data is unavailable.

IEVS and SVES must be matched at each SNAP application/reapplication and recertification action (annual and six month), as well, as when adding new individuals (including a previously sanctioned individual) to a SNAP household. Interfaces and query systems that must be reviewed prior to certification include:

- SDX Information
- BENDEX Information
- Prisoner Match
- SSA Death Match
- NDQ Inquiry
- Unemployment Insurance Data
- Special Benefit Data
- State Wage Data
- S.C. Retirement System Data
- Child Support Payments
- New Hires Inquiry
- PPP Fleeing Felons Inquiry
- DHEC Death Match

If the State agency has information that the IEVS/SVES information about a particular household is questionable, this information will be considered unverified upon receipt and the Agency will independently verify the information.

The Agency will obtain independent verification of unverified information obtained from IEVS/SVES by means of contacting the household and/or the appropriate income, resource or benefit source. If the Agency chooses to contact the household, it must do so in writing, informing the household of the information which it has received, and requesting that the household respond within 10 days. If the household fails to respond in a timely manner, the Agency will send it a notice of adverse action as specified in **Chapter 16 Notice of Adverse Action**. The Agency may contact the appropriate source by the means best suited to the situation. When the household or appropriate source provides the independent verification, the Agency will properly notify the household of the action it intends to take and provide the household with an opportunity to request a fair hearing **(see Chapter 18 Fair Hearings)** to any adverse action.

Verification of SC State Retirement income, employment security wage information (state wage) and unemployment compensation benefit (UCB) information obtained from the agencies administering those programs is considered verified upon receipt.

5.6 DOCUMENTATION

SNAP case files must be documented to support eligibility, ineligibility, and benefit level determinations. Documentation shall be in sufficient detail to permit a reviewer to determine the reasonableness and accuracy of the determination.

5.7 VERIFICATION SUBSEQUENT TO INITIAL CERTIFICATION

(1) Recertification

At recertification the Agency will verify:

(A) Newly obtained social security numbers in accordance with verification procedures outlined in **Section 5.1, Verification Prior to Certification, (3) *Social security numbers;***
(B) A change in income if the source has changed or the amount has changed by more than $50.
(C) Actual rent/mortgage expense that changed by more than $25.
(D) Actual utility expenses which have changed by more than $25.
(E) Any changes in the legal obligation to pay child support, the obligated amount, and the amount of legally obligated child support a household member pays to a non-household member for households eligible for a child support deduction.
(F) Other information which has changed. These changes will be subject to the same verification procedures as apply during initial certification in **Section 5.1, Verification Prior to Certification**.
(G) Previously unreported non-recurring medical expenses incurred during the certification period and total recurring medical expenses which have changed regardless of the amount ~~by more than $25~~.

Six Month Recertification

- The intent is not to re-calculate all medical expenses at the six month recertification, however, if a new **recurring** expense is reported and verified and causes an increase; the information must be acted upon as a change.
- For a new **non-recurring** expense, this would be verified and acted upon at the annual recertification.
- A household, not receiving a medical deduction that becomes eligible to receive a medical deduction and reports medical expenses are incurred, must be given the deduction according to the amount verified:
  - If the amount of medical expenses incurred and verified is $35.00 or less per month, no medical deduction will be allowed.
  - If the amount of medical expenses incurred and verified is more than $35.00 but does not exceed $210.00 per month, the Standard Medical Deduction must be allowed.

The household should verify a monthly medical expense amount of at least $35.01 to be eligible to receive the Standard Medical Deduction.
- ❖ If the amount of medical expenses incurred and verified exceeds $210.00 monthly, the Excess Medical Deduction must be allowed.

Since medical expenses are annualized prospectively, usually there will not be a change made at the six month recertification. Households already receiving the Standard Medical Deduction will remain eligible for the Standard Medical Deduction at subsequent recertification if they simply declare that their medical expenses continue to exceed $35.00 per month.

NOTE: If a household reports new medical expenses or becomes eligible to receive a medical expense deduction but does not provide verification of the expense(s) with the form, the case cannot be registered as incomplete. However, the six month recertification should be processed without the non-mandatory (optional) verification.

Annual Recertification

- Verify and use only the medical expense incurred during the previous certification period.
- The total of the non-recurring expenses incurred during the previous certification period will be verified and prorated over the new certification period.
- Recurring expenses need to be verified and evaluated to determine if the average monthly amounts have changed.
- A household, not receiving a medical deduction that becomes eligible to receive a medical deduction and reports medical expenses are incurred, must be given the deduction according to the amount verified:
  - ❖ If the amount of medical expenses incurred and verified is $35.00 or less per month, no medical deduction will be allowed.
  - ❖ If the amount of medical expenses incurred and verified is more than $35.00 but does not exceed $210.00 per month, the Standard Medical Deduction must be allowed. The household should verify a monthly medical expense amount of at least $35.01 to be eligible to receive the Standard Medical Deduction.
  - ❖ If the amount of medical expenses incurred and verified exceeds $210.00 monthly, the Excess Medical Deduction must be allowed.

A household already receiving the Standard Medical Deduction will remain eligible for the Standard Medical Deduction at subsequent recertification if they simply declare that their medical expenses continue to exceed $35.00 per month. Verification of medical expenses is not required for subsequent recertification, unless the declaration is questionable.

24 Month Recertification

- Medical expenses will be recalculated at the interim contact (12 months) and at the 24 month recertification.
- Recurring expenses should be verified and evaluated to determine if the average monthly amounts have changed.
- Nonrecurring expenses incurred during the previous certification period should be verified and prorated over the new certification period.

Unchanged information will not be verified unless the information is incomplete, inaccurate, inconsistent or outdated.

A household already receiving the Standard Medical Deduction will remain eligible for the Standard Medical Deduction at subsequent recertification if they simply declare that their medical expenses continue to exceed $35.00 per month. Verification of medical expenses is not required for subsequent recertification, unless the declaration is questionable.

(2) Changes

Changes reported during the certification period will be subject to the same verification procedures as apply at initial certification in **Section 5.1, Verification Prior to Certification**, except that the Agency will not verify changes in income if the source has not changed and if the amount has changed by $50 or less, unless the information is incomplete, inaccurate, inconsistent or outdated. The Agency will also not verify ~~total medical expenses or~~ actual utility expenses which are unchanged or have changed by $25 or less, unless the information is incomplete, inaccurate, inconsistent or outdated.

If a change in medical expenses ~~over $25~~ is reported, use the following procedures:

- If a new medical expense is non-recurring, verify the expense and inform the client that this expense will be budgeted at the annual recertification and the deduction will be prorated over the next certification period.
- If the new medical expense is a recurring expense, verify the expense and the case should be rebudgeted including the new expense if it will increase the allotment.
- If a change is reported in medical expenses that will decrease the benefit, no action will be taken until the next mandatory rebudget of the case.

Chapter 6

Chapter 6 Processing Standards

6.1 NORMAL PROCESSING STANDARDS

The Agency will provide eligible households that complete the initial application process an opportunity to participate as soon as possible, but no later than 30 calendar days following the date the application was filed.

An application is filed the day the appropriate SNAP office receives an application containing the applicant's name and address, which is signed by either a responsible member of the household or the household's authorized representative (**Section 3.5 Authorized Representatives**). Households entitled to expedited processing are specified in **Section 6.5 Entitlement to Expedited Services**.

For residents of public institutions who apply for SNAP prior to their release from the institution, the Agency will provide an opportunity to participate as soon as possible, but not later than 30 calendar days from the date of release of the applicant from the institution.

6.2 AGGREGATE (COMBINED) ALLOTMENTS

Households which apply for initial month benefits after the 15th of the month, are processed under normal processing timeframes, have completed the application process within 30 days of the date of application, and have been determined eligible to receive benefits for the initial month of application and the next subsequent month, will be issued a combined allotment which includes prorated benefits for the month of application and benefits for the first full month of participation.

6.3 DENYING THE APPLICATION

Households that are found to be ineligible will be sent a notice of denial as soon as possible but not later than 30 days following the date the application was filed. If the household has failed to appear for a scheduled interview and has made no subsequent contact with the Agency to express interest in pursuing the application, the Agency will send the household a notice of denial on the 30th day following the date of application. The household must file a new application if it wishes to participate in the program.

In cases where the Agency was able to conduct an interview and request all of the necessary verification on the same day the application was filed, and no subsequent requests for verification have been made, the Agency may also deny the application on the 30th day if the household failed to provide the requested verification and there is no indication that the household is unable to obtain the requested verification.

6.4 DELAYS IN PROCESSING THE APPLICATION

If by the 30th day the Agency cannot take action on the application, the Agency will send the household a notice of denial. If a notice of denial is sent and the household takes the required action within 60 days following the date the application was filed, the Agency will reopen the case without requiring a new application.

If the household was at fault for the delay in the first 30-day period, but is found to be eligible during the second 30-day period, the Agency will provide pro-rated benefits from the date the household took the required action. The household is not entitled to benefits from the date of application when the delay was the fault of the household.

The Agency must have taken the following actions before a delay can be considered the fault of the household:

- For households that have failed to complete the application form, the Agency must have offered, or attempted to offer, assistance in its completion.
- If one or more members of the household have failed to register for work, as **Section 8.1 Work Requirements**, the Agency must have informed the household of the need to register for work, determined if the household members are exempt from work registration, and given the household at least 10 days from the date of notification to register these members.
- In cases where verification is incomplete, the Agency must have provided the household with a statement of required verification and offered to assist the household in obtaining required verification if assistance was requested, and allowed the household sufficient time to provide the missing verification. Sufficient time shall be at least 10 days from the date of the Agency's initial request for the particular verification that was missing.
- For households that have failed to appear for an interview, the Agency must notify the household that it missed the scheduled interview and that the household is responsible for rescheduling a missed interview. If the household contacts the Agency within the 30 day processing period, the Agency must schedule a second interview.

Whenever a delay in the initial 30-day period is the fault of the Agency, the Agency will take immediate corrective action. If the household is found to be eligible during the second 30-day period, the household shall be entitled to benefits retroactive to the date of application. If, however, the household is found to be ineligible, the Agency will deny the application.

After the end of the second 30-day period, the Agency will require the household to file a new application if it wishes to participate.

6.5 ENTITLEMENT TO EXPEDITED SERVICE

The following households are entitled to expedited service:

(A) Households with less than $150 in monthly gross income, as computed in **Chapter 13 Determining Household Eligibility and Benefits Levels** provided their liquid resources (i.e., cash on hand, checking or savings accounts, savings certificates, and lump sum payments, etc.) do not exceed $100;

(B) Migrant or seasonal farm worker households who are destitute as defined in **Section 13.7 Destitute Households** provided their liquid resources (i.e., cash on hand, checking or savings accounts, savings certificates, and lump sum payments, etc.) do not exceed $100;

(C) Households whose combined monthly gross income and liquid resources are less than the household's monthly rent or mortgage, and utilities. If the applicant household is entitled to the MUA or BUA, use the appropriate standard as the utility expense when determining eligibility for expedited services. If the household is not entitled to either the MUA or the BUA, use actual expenses to make the determination. **See Section 12.5 (2) Utility Allowances .**

The Agency's application procedures will identify households eligible for expedited service. There is no limit to the number of times a household can be certified under expedited procedures, as long as prior to each expedited certification, the household either completes the verification requirements that were postponed at the last expedited certification or was certified under normal processing standards since the last expedited certification. Entitlement to expedited service will not apply at recertification if a household reapplies before the end of its current certification period.

6.6 PROCESSING STANDARDS FOR EXPEDITED SERVICE

For households entitled to expedited service, the Agency will make available to the recipient benefits on an Electronic Benefits Transfer (EBT) card **(See Section 22.1 Method of Issuance)** not later than the seventh calendar day following the date an application was filed. For a resident of a public institution who applies for benefits prior to his/her release from the institution and who is entitled to expedited service, the date of filing of his/her SNAP application is the date of release of the applicant from the institution.

If a household is entitled to expedited service, the Agency must conduct the interview and process the application within the expedited service standards. The first day of this count is the calendar day following application filing.

Note: If the Agency properly screened the client resulting in the correct interview notice being sent, then the client must contact the agency for their interview by the sixth day (or if the sixth day falls on weekend or holiday the client has until the next business day) in order to receive expedited services. Otherwise, the client will lose entitlement to expedited services, unless the client's

failure to call by the 6th day is due to an agency caused delay. Examples of Agency caused delays include but are not limited to: Agency closure, high call volume in the Interview Center which prevented clients from being able to reach an interviewer, delays in mailing of interview notices, systems failure (i.e. CHIP System or SCOSA, or telephones in the Interview Center inoperable for an extended period of time).

If the prescreening required in **Section 6.5 Entitlement to Expedited Service** fails to identify a household as being entitled to expedited service and the Agency subsequently discovers that the household is entitled to expedited service, the Agency will provide expedited service to households within the processing standards, except that the processing standard will be calculated from the date the Agency discovers the household is entitled to expedited service.

6.7 VERIFICATION REQUIREMENTS FOR EXPEDITED SERVICE

In all cases, the applicant's identity (i.e., the identity of the person making the application) will be verified through a collateral contact (**Section 5.2 Sources of Verification, (2) *Collateral Contacts***) or readily available documentary evidence as specified in **Section 5.2 Sources of Verification, (1) Documentary evidence.**

Households entitled to expedited service will be asked to furnish a social security number (SSN) for each person applying for SNAP benefits or apply for one for each person applying before the second full month of participation. Those household members unable to provide the required SSN's or who do not have one prior to the second full month of participation shall be allowed to continue to participate only if they satisfy the good cause requirements with respect to SSN's specified in **Section 7.2 Social Security Numbers (SSN's), (4) *Determining good cause*.**

EXCEPTION: Households with a newborn may have up to 6 months following the month the baby was born to supply an SSN or proof of an application for an SSN for the newborn.

All reasonable efforts will be made to verify within the expedited processing standards, the household's residency in accordance with **Section 5.1 Verification Prior to Certification, (2) *Residency***, income (including a statement that the household has no income), and all other factors required by **Section 5.1 Verification Prior to Certification**, through readily available documentary evidence as specified in **Section 5.3 Sources of Verification, (1) Documentary evidence** or collateral contacts **(Section 5.2 Sources of Verification, (2) *Collateral Contacts*).**..

However, benefits will not be delayed beyond the delivery standards prescribed in **Section 6.6 Processing Standards for Expedited Service** solely because these eligibility factors have not been verified.

6.8 CERTIFICATION PERIODS FOR EXPEDITED HOUSEHOLDS

Households that are certified on an expedited basis and have provided all necessary verification required in **Section 5.1 Verification Prior to Certification** prior to certification will be assigned normal certification periods. If verification was postponed, the Agency may certify these households for the month of application (the month of application and the subsequent month for those households applying after the 15th of the month).

For households applying on or before the 15th of the month, the Agency will assign a one-month certification period with satisfaction of the verification requirements postponed until the second month of participation. The household must be notified that the household has to satisfy all verification requirements that were postponed.

For households applying after the 15th of the month, the Agency will assign a 2-month certification period with satisfaction of the verification requirements postponed until the second month of participation. The household must be notified that the household has to satisfy all verification requirements that were postponed.

Note: Postponed verification must be provided within 30 days for households applying on or before the 15th of the month, and prior to the end of the second month for households applying after the 15th of the month. The certification worker who processes the expedited application must set an alert in CHIP to be generated 30 days from the file date to instruct the worker to close the case if the postponed verification has not been submitted.

Households which apply for initial benefits, are entitled to expedited service, have completed the application process, and have been determined eligible to receive benefits for the initial month and the next subsequent month, will receive a combined allotment consisting of prorated benefits for the initial month of application and benefits for the first full month of participation within the expedited service timeframe.

For subsequent months, the household must satisfy the verification requirements which were postponed and be certified under normal processing standards. If the household does not satisfy the postponed verification requirements, the Agency does not need to contact the household again before closing the case.

Chapter 7

Chapter 7 Non-financial Eligibility Factors

7.1 RESIDENCY

A household will live in the State in which it files an application for participation. Individual counties within the State are considered project areas for the SNAP. No individual may participate as a member of more than one household or in more than one project area or State, in any month.

Exception: Residents of a shelter that serves battered women and their children who are included in households already certified may apply for and, if otherwise eligible, participate as a separate household if the certified household listing them as members also contains the person who abused them.

The Agency will not:

(A) Impose any durational residency requirements as a condition of eligibility;
(B) Require an otherwise eligible household to reside in a permanent dwelling or have a fixed mailing address as a condition of eligibility; or
(C) Require intent to reside permanently in the State.

Persons in an area solely for vacation purposes shall not be considered residents.

When a household moves within the State, the Agency will transfer the household's case file to the new project area and continue the household's certification without reapplication.

The Agency will act on changes in household circumstances resulting from the move in accordance with **Chapter 15 Change Reporting Requirements**. The Agency will ensure that the transfer of a household's case will not adversely affect the household.

7.2 SOCIAL SECURITY NUMBERS (SSN'S)

(1) Requirements for participation

The Agency will require that a household participating or applying for participation in the SNAP provide the Agency with the social security number (SSN) of each household member or apply for one before certification (see **Section 5.1 Verification Prior to Certification, (3) *Social security numbers (SSN's)***). If individuals have more than one number, all numbers shall be required. The Agency will explain to applicants and participants that refusal or failure without good cause to provide an SSN will result in disqualification of the individual for whom an SSN is not obtained.

(2) Obtaining SSN's for SNAP household members

For those individuals who provide SSN's prior to certification, recertification or at any office contact, the Agency will record the SSN and verify it in accordance with **Section 5.1 Verification Prior to Certification, (3) *Social security numbers (SSN's)*.**

For those individuals who do not have an SSN, who do not know if they have an SSN, or are unable to find their SSN the Agency will assist as needed in completing the application for an SSN, Form SS–5.

If the household is unable to provide proof of application for an SSN for a newborn, the household must provide the SSN or proof of application at its next recertification or within 6 months following the month the baby is born, whichever is later. If the household is unable to provide an SSN or proof of application for an SSN at its next recertification within 6 months following the baby's birth, the Agency will determine if the good cause provisions are applicable.

In determining if good cause exists for failure to comply with the requirement to apply for or provide the Agency with an SSN, the Agency will consider information from the household member, SSA and the Agency. Evidence that the household member has applied for an SSN or made every effort to supply SSA with the necessary information to complete an application for an SSN will be considered good cause for not complying timely with this requirement.

Good cause does not include delays due to illness, lack of transportation or temporary absences, because SSA makes provisions for mail-in applications in lieu of applying in person. If the household member can show good cause why an application for a SSN has not been completed in a timely manner, that person shall be allowed to participate for one month in addition to the month of application. If the household member applying for an SSN has been unable to obtain the documents required by SSN, the Agency should make every effort to assist the individual in obtaining these documents. Good cause for failure to apply must be shown monthly in order for such a household member to continue to participate. Once an application for SSN has been filed, the Agency will permit the member to continue to participate, pending notification of the household member's SSN.

(3) Failure to comply

If the Agency determines that a household member has refused or failed without good cause to provide or apply for an SSN, then that individual will be ineligible to participate in the SNAP.

The disqualification applies to the individual for whom the SSN is not provided and not to the entire household.

The earned or unearned income (and resources, if applicable) of an individual disqualified from the household for failure to comply with this requirement shall be counted as household income and resources to the extent specified in **Section 14.1 Treatment of Income and Resources of Certain Non-household Members (2) *SSN disqualifications*.**

(4) Ending disqualification

The household member(s) disqualified may become eligible upon providing the Agency with an SSN.

(5) Use of SSN's

The Agency is authorized to use SSN's in the administration of the SNAP. The Agency will also use the SSN's to prevent duplicate participation, to facilitate mass changes in Federal benefits and to determine the accuracy and/or reliability of information given by households. In particular, SSN's will be used by the Agency to request and exchange information on individuals through the IEVS and SVES.

7.3 CITIZENSHIP AND ALIEN STATUS

(1) Household members meeting citizenship or alien status requirements

No person is eligible to participate in the SNAP unless that person is:

- A U.S. citizen
- A U.S. non-citizen national
- A member of an Indian tribe as defined in Section 4(e) of the Indian Self-determination and Education Assistance Act which is recognized as eligible for the special programs and services provided by the U.S. to Indians because of their status as Indians
- An American Indian born in Canada who possesses at least 50 per centum of blood of the American Indian race to whom the provisions of the Immigration and Nationality Act apply
- An individual who is lawfully residing in the U.S. and was a member of a Hmong or Highland Laotian tribe at the time that the tribe rendered assistance to U.S. personnel by taking part in a military or rescue operation during the Vietnam era (beginning August 5, 1964, and ending May 7, 1975).

The spouse of such Hmong or Highland Laotian who is deceased, or

An unmarried dependent child of such Hmong or Highland Laotian who is under the age of 18 or if a full-time student under the age of 22;

An unmarried child under the age of 18 or if a full time student under the age of 22 of such a deceased Hmong or Highland Laotian provided the child was dependent upon him or her at the time of his or her death; or

An unmarried disabled child age 18 or older if the child was disabled and dependent on the person prior to the child's 18th birthday

- A Qualified Non-Citizen/Alien:

Most non-citizens must be in a qualified non-citizen/alien category **and** must meet one additional condition. However, there are some exceptions. **Qualified non-citizens in the chart below do not have to meet additional non-citizen requirements to be eligible for SNAP.** **Note:** These individuals must, however, meet all other SNAP eligibility requirements such as income, residency, etc.
The certification worker must verify the immigration status of the individual in one of the below categories using the appropriate INS form along with SAVE. See SNAP Toolkit #4 for acceptable forms of verification for each category.

Qualified Non-Citizens Who Do Not Have to Meet Additional Non-Citizen Conditions to Be Eligible
Amerasians
Asylees
Cuban or Haitian Entrants
Deportation (or Removal) Withheld
Iraqi and Afghan Special Immigrants
Lawfully Admitted for Permanent Residence (LPRs) with 40 Qualifying Work Quarters From Spouse or Parents
Refugees
Trafficking Victims

Qualified non-citizens in the following categories may be eligible without meeting additional criteria if they have been in the category for at least five (5) years. See the chart below.

Qualified Non-Citizens Who May Be Eligible if They Have Been in the Below Status for at Least Five (5) Years	
Category	**Description**
Lawfully Admitted for Permanent Residence (LPR)	LPRs are holders of Permanent Resident Cards, which are also informally referred to as "green cards"
Conditional Entrants	Granted conditional entry under §203(a)(7) of the INA as in effect before 04/01/1997
Battered Non-Citizens	Under certain circumstances, a battered non-citizen spouse or child, non-citizen parent of a battered child or a non-citizen child of a battered parent with a petition pending.
Parolees	Paroled into the U.S. under §212(d)(5) of the INA for at least 1 year.

If the non-citizen has been in one of the above categories for less than five (5) years, he/she must meet one (1) of the criteria in the chart below, in addition to the criteria above:

Additional Criteria that Qualified Non-Citizens in the Above Chart Must Meet if They Have Not Been in the Qualifying Status For At Least 5 Years. **The Non-Citizen Must Meet One of the Below Criteria in Addition to One in the Chart Above.**	
Category	**Description**
Blind or Disabled	Blind or disabled receiving benefits or assistance for their condition regardless of entry date
Children under 18	Any qualified alien under 18 years of age who lawfully resides in the U.S.
Elderly born on or before 08/22/1931 who lawfully resided in the U.S. on 08/22/1996	
Military Connection	An individual who is lawfully residing in a state and is on active duty in the military (excluding National Guard) or is an honorably discharged veteran whose discharge is not because of immigration status (includes spouse, surviving spouse- if not married, and unmarried dependent children).

	Note: A discharge "Under Honorable Conditions" is not the same as an honorable discharge and does not meet this requirement.
5 Years of Residence	The individual has lived in the U.S. as a qualified alien for five (5) years from the date of entry.

Each category of eligible alien status stands alone for purposes of determining eligibility. Subsequent adjustment to a more limited status does not override eligibility based on an earlier less rigorous status. Likewise, if eligibility expires under one eligible status, the Agency must determine if eligibility exists under another status.

Note: After one (1) year, most refugees and asylees are eligible for Lawful Permanent Resident (LPR) status. Refugees and Asylees remain eligible for SNAP benefits after they attain Lawful Permanent Resident Status. They are exempt from the LPR five (5) year residency requirement.

For acceptable sources of verification for the table above see **SNAP Tool Kit Attachment 4: Acceptable Verification of Alien Eligibility.** See also **Section 5.1(6) Alien Eligibility.**

Whenever personnel responsible for the certification or recertification of households determine that any member of a household is ineligible to receive SNAP benefits because it is known that the member is present in the U.S. in violation of the Immigration and Naturalization Act, the Agency must inform the Immigration and Naturalization Service (INS). "Knowing" that a person is not lawfully in the US is determined when the finding of unlawful presence is made as a part of a formal determination subject to administrative review and is supported by a determination of the INS or the Executive Office of Immigration Review, such as a final Order of Deportation.

(2) Sponsored aliens

A sponsored alien is an alien for whom a person (the sponsor) has executed an affidavit of support (INS Form I–864 or I–864A) on behalf of the alien pursuant to section 213A of the INA.

Only in the event a sponsored alien is an eligible alien in accordance with **Section 7.3 Citizenship and Alien Status, (1) *Household members meeting citizenship or alien status requirements*** will the Agency consider available to the household the income and resources of the sponsor and spouse. For purposes of determining the eligibility and benefit level of a household of which an eligible sponsored alien is a member, the Agency must deem the income and resources of sponsor and the sponsor's spouse, if he or she has executed INS Form I–864 or I–864A, as the unearned income and resources of the sponsored alien. The Agency must deem the sponsor's income and resources until the alien gains U. S. citizenship, has worked or can receive credit for 40 qualifying quarters of work or the sponsor dies.

The monthly income of the sponsor and sponsor's spouse (if he or she has executed INS Form I–864 or I–864A) deemed as that of the eligible sponsored alien must be the total monthly earned and unearned income, as defined in **Section 11.3 Earned Income**, **Section 11.4 Self-employment Income**, and **Section 11.5 Unearned Income** with the exclusions provided in **Section 11.6 Income Exclusions** of the sponsor and sponsor's spouse at the time the household containing the sponsored alien member applies or is recertified for participation, reduced by:

(A) A 20 % earned income amount for that portion of the income determined as earned income of the sponsor and the sponsor's spouse; and
(B) An amount equal to the Program's monthly gross income eligibility limit for a household equal in size to the sponsor, the sponsor's spouse, and any other person who is claimed or could be claimed by the sponsor or the sponsor's spouse as a dependent for Federal income tax purposes.

The Agency must consider as income to the alien any money the sponsor or the sponsor's spouse pays to the eligible sponsored alien, but only to the extent that the money exceeds the amount deemed to the eligible sponsored alien as determined above. The Agency must deem, where applicable, as available to the eligible sponsored alien the total amount of the resources of the sponsor and sponsor's spouse, reduced by $1,500.

If a sponsored alien can demonstrate to the Agency's satisfaction that his or her sponsor is the sponsor of other aliens, the Agency must divide the income and resources, where applicable, deemed under the provisions of this sections by the number of such sponsored aliens.

The provisions of **Section 7.3 Citizenship and Alien Status, (4) *Deeming of sponsor's income and resources*** do not apply to:

(A) An alien who is a member of his or her sponsor's SNAP household;
(B) An alien who is sponsored by an organization or group as opposed to an individual;
(C) An alien who is not required to have a sponsor under the Immigration and Nationality Act, such as a refugee, a parolee, an asylee, or a Cuban or Haitian entrant;
(D) An indigent alien that the Agency has determined is unable to obtain food and shelter taking into account the alien's own income plus any cash, food, housing, or other assistance provided by other individuals, including the sponsor(s). Prior to determining whether an alien is indigent, the Agency must explain the purpose of the determination to the alien and/or household representative and provide the alien and/or household representative the opportunity to refuse the determination. If the household refuses the determination, the Agency will not complete the determination and will deem the sponsor's income and resources to the alien's household. The State agency must inform the sponsored alien of the consequences of refusing this determination.

NOTE: For purposes of this paragraph, the phrase "is unable to obtain food and shelter" means that the sum of the eligible sponsored alien's household's own income, the cash contributions of the sponsor and others, and the value of any in-kind assistance the sponsor and others provide, does not exceed 130 percent of the poverty income guideline for the household's size.

The Agency must determine the amount of income and other assistance provided in the month of application. If the alien is indigent, the only amount that the Agency must deem to such an alien will be the amount actually provided for a period beginning on the date of such determination and ending 12 months after such date. Each indigence determination is renewable for additional 12-month periods;

NOTE: The Agency must notify the Office of the Attorney General of each such determination, including the names of the sponsor and the sponsored alien involved. Information about the sponsored alien is not shared with the Attorney General or the sponsor without the sponsored alien's consent. The Agency must inform the sponsored alien of the consequences of failure to provide such consent. If the sponsored alien fails to provide consent, he or she will be ineligible, and the Agency will determine the eligibility and benefit level of the remaining household members.

(E) A battered alien spouse, alien parent of a battered child or child of a battered alien, for 12 months after the Agency determines that the battering is substantially connected to the need for benefits, and the battered individual does not live with the batterer. After 12 months, the Agency must not deem the batterer's income and resources if the battery is recognized by a court or the INS and has a substantial connection to the need for benefits, and the alien does not live with the batterer.
(F) A sponsored alien child under 18 years of age of a sponsored alien.
(G) A citizen child under age 18 of a sponsored alien.

During the period the alien is subject to deeming, the eligible sponsored alien is responsible for obtaining the cooperation of the sponsor and for providing the Agency at the time of application and at the time of recertification with the information and documentation necessary to calculate deemed income and resources in accordance **Section 7.3 Citizenship and Alien Status, (4) *Deeming of sponsor's income and resources***.

The eligible sponsored alien is responsible for providing the names and other identifying factors of other aliens for whom the alien's sponsor has signed an affidavit of support. The Agency must attribute the entire amount of income and resources to the applicant eligible sponsored alien until he or she provides the information. The eligible sponsored alien is also responsible for reporting the required information about the sponsor and sponsor's spouse should the alien obtain a different sponsor during the certification period and for reporting a change in income should the sponsor or the sponsor's spouse change or lose employment or die during the certification period.

The Agency must handle such changes in accordance with the timeliness standards described in with **Chapter 15 Change Reporting Requirements**, as appropriate.

Until the alien provides information or verification necessary to carry out the provisions of **Section 7.3 Citizenship and Alien Status, (4) *Deeming of sponsor's income and resources***, the sponsored alien is ineligible. The Agency must determine the eligibility of any remaining household members. The Agency must consider available to the remaining household members the income and resources of the ineligible alien (excluding the deemed income and resources of the alien's sponsor and sponsor's spouse) in determining the eligibility and benefit level of the

remaining household members in accordance with **Section 14.2 Treatment of Income and Resources of Other Non-household Members**. If the sponsored alien refuses to cooperate in providing information or verification, other adult members of the alien's household are responsible for providing the information or verification required in accordance with the provisions of **Section 3.4 Household Cooperation in Filing an Application for the Supplemental Nutrition Assistance Program (SNAP)**. If the Agency subsequently receives information or verification, it must act on the information as a reported change in household membership in accordance with the timeliness standards in **Chapter 15 Change Reporting Requirements**, as appropriate. If the same sponsor is responsible for the entire household, the entire household is ineligible until such time as the household provides the needed sponsor information or verification. The Agency must assist aliens in obtaining verification in accordance with the provisions of **Section 5.4 Responsibility for Obtaining Verification.**

7.4 STUDENTS

(1) Applicability

An individual who is enrolled at least half-time (as defined by the institution) in an institution of higher education shall be ineligible to participate in the SNAP unless the individual qualifies for one of the exemptions contained **Section 7.4 Students, (2) *Student exemptions***.

Note: If the student has a meal plan that covers at least 50% of their meals, the student is not entitled to participate in the SNAP.

An individual is considered to be enrolled in an institution of higher education if the individual is:

(A) Enrolled in a business, technical, trade, or vocational school, that normally requires a high school diploma or equivalency certificate for enrollment in the curriculum; **or**

(B) If the individual is enrolled in a regular curriculum at a college or university that offers degree programs regardless of whether a high school diploma is required. This includes online, web-based institutions.

Hints for Determining if someone is subject to Student Eligibility Criteria:

When it is reported that a household member between18-49 is a student:

1. First determine and **verify** if the individual meets the definition of student as defined above in Section 7.4 (1). If he/she does not meet the definition of a student, then student exemptions are not an issue.

   Exception: There is no need to verify student status if the individual meets an obvious student exemption.

2. If the individual meets the SNAP definition of student, then she must meet one of the student exemptions in Section 7.4 (2) below in order to be included in the budget. These must be verified.

(2) Student Exemptions

To be eligible for the program, a student as defined in **Section 7.4 Students, (1) *Applicability*** must meet at least one of the following criteria.

(A) Be age 17 or younger or age 50 or older;

(B) Be physically or mentally unfit;
For purposes of this exemption, the individual must be mentally or physically unable to work at least 20 hours per week and attend school. **This exemption does not have to be verified if the unfitness is obvious to the certification worker**. If it is not obvious to the certification worker, it must be verified, unless the client receives government disability benefits such as VA, state retirement disability, social security disability, SSI, etc.

(C) Be receiving Temporary Assistance for Needy Families under Title IV of the Social Security Act;

(D) Be enrolled as a result of participation in the Job Opportunities and Basic Skills program under Title IV of the Social Security Act or its successor program;

(E) Be employed for a minimum of 20 hours per week and be paid for such employment or, if self-employed, be employed for a minimum of 20 hours per week and receiving weekly earnings at least equal to the Federal minimum wage multiplied by 20 hours;

(F) Be participating in a State or federally financed work study program during the regular school year. To qualify under this provision, the student must be approved for work study at the time of application for SNAP benefits, the work study must be approved for the school term, and the student must anticipate actually working during that time. The exemption shall begin with the month in which the school term begins or the month work study is approved, whichever is later. Once begun, the exemption shall

continue until the end of the month in which the school term ends, or it becomes known that the student has refused an assignment. The exemption will not continue between terms when there is a break of a full month or longer unless the student is participating in work study during the break.

(G) Be participating in an on-the-job training program. A person is considered to be participating in an on-the-job training program only during the period of time the person is being trained by the employer;

(H) Be responsible for the care of a dependent household member under the age of 6;

(I) Be responsible for the care of a dependent household member who has reached the age of 6 but is under age 12 when the Agency has determined that adequate child care is not available to enable the student to attend class and comply with the work requirements of paragraph **Section 7.4 Students, (2) *Student exemptions*, (E)** or **(F);**

(J) Be a single parent enrolled in an institution of higher education on a full-time basis (as determined by the institution) and be responsible for the care of a dependent child under age 12. This provision applies in those situations where only one natural, adoptive or stepparent (regardless of marital status) is in the same SNAP household as the child. If no natural, adoptive or stepparent is in the same SNAP household as the child, another full-time student in the same SNAP household as the child may qualify for eligible student status under this provision if he or she has parental control over the child and is not living with his or her spouse.

(K) Be assigned to or placed in an institution of higher education through or in compliance with the requirements of one of the programs identified below. Self-initiated placements during the period of time the person is enrolled in one of these employment and training programs shall be considered to be in compliance with the requirements of the employment and training program in which the person is enrolled provided that the program has a component for enrollment in an institution of higher education and that program accepts the placement. Persons who voluntarily participate in one of these employment and training programs and are placed in an institution of higher education through or in compliance with the requirements of the program shall also qualify for the exemption. The programs are:

i. Program under the Job Training Partnership Act of 1974 (29 U.S.C. 1501, et seq.);

ii. An employment and training program under where one or more of the components of such program is at least equivalent to an acceptable SNAP employment and training program component.
See Section 9.6 SNAP 2 WORK Program Components for acceptable employment and training program components.

(3) Enrollment status

The enrollment status of a student will begin on the first day of the school term of the institution of higher education. Such enrollment will be deemed to continue through normal periods of class attendance, vacation and recess, unless the student graduates, is suspended or expelled, drops out, or does not intend to register for the next normal school term (excluding summer school).

(4) Income and resources

The income and resources, where applicable, of an ineligible student will not be considered. **Section 14.2 Treatment of Income and Resources of Other Non-household Members.**

Chapter 8 Work Provisions

8.1 WORK REQUIREMENTS

As a condition of eligibility for SNAP benefits, each household member not exempt under **8.2 Exemptions from Work Requirements** must comply with the following SNAP work requirements:

(A) Register for work or be registered by the Agency at the time of application and every 12 months after initial registration. The member required to register need not complete the registration form. By signing the application or recertification form, the primary informant (PI) will be considered to have registered all household members required to be registered. This registration is completed when the registration is recorded on the CHIP EMPR screen.

(B) Provide the Agency with sufficient information regarding employment status or availability for work;

(C) Report to an employer to whom referred by the Agency if the potential employment meets the suitability requirements described in **Section 8.8 Suitable Employment**;

(D) Accept a bona fide offer of suitable employment, as defined in **Section 8.8 Suitable Employment**, at a site or plant not subject to a strike or lockout, at a wage equal to the higher of the Federal or State minimum wage or 80 percent of the wage that would have governed had the minimum hourly rate under section 6(a) (1) of the Fair Labor Standards Act been applicable to the offer of employment.

(E) Do not voluntarily and without good cause quit a job of 30 or more hours a week or reduce work effort to less than 30 hours a week, in accordance with **Section 8.10 Voluntary Quit and Reduction of Work Effort**.

Strikers whose households are eligible under the criteria in **Section 2.4 Strikers** are subject to SNAP work requirements unless they are exempt under **Section 8.2 Exemptions from Work Requirements** at the time of application.

Household members who are applying for SSI and for food stamps under **Section 4.6 Applicant Supplemental Security Income (SSI) Households** will have SNAP work requirements waived until they are determined eligible for SSI and become exempt from SNAP work requirements, or

until they are determined ineligible for SSI, at which time their exemptions from SNAP work requirements will be reevaluated.

8.2 EXEMPTIONS FROM WORK REQUIREMENTS

The certification worker shall determine which household members are exempt from the work registration requirement at the time of:

1. Initial certification
2. Recertification (both annual and six month)
3. When adding a new individual to the SNAP household

Persons who fall into the following categories are exempt from SNAP work requirements:

(A) Age limits:

- A person younger than 16 years of age OR
- A person 60 years of age or older OR
- A person age 16 or 17 who is not the head of a household or who is attending school, or is enrolled in an employment training program, on at least a half-time basis. If the person turns **16 (or 18 under the preceding sentence) during a certification period, the Agency must** register the person as part of the next scheduled recertification process, unless the person qualifies for another exemption.

(B) Caretakers:

A parent or other household member responsible for the care of a dependent child under 6 or an incapacitated person.

Note: If the child has his or her 6th birthday during a certification period, the Agency must work register the individual responsible for the care of the child as part of the next scheduled recertification process, unless the individual qualifies for another exemption.

(C) Drug Addiction and Alcohol Treatment Program Participants:

A regular participant in a drug addiction or alcohol treatment and rehabilitation program.

(D) Employed:

An employed or self-employed person working a minimum of 30 hours weekly or earning weekly wages at least equal to the Federal minimum wage multiplied by 30 hours. This includes migrant and seasonal farm workers under contract or similar agreement with an employer or crew chief to begin employment within 30 days (although this will not

prevent individuals from seeking additional services from the State employment services agency).

(E) FI/TANF Recipients:

Family Independence (FI)/Temporary Assistance for Needy Families (TANF) recipients who are subject to and complying with FI/TANF work activity requirements.

(F) Incapacitated:

Recipients of SSI and persons who are physically or mentally incapable of engaging in gainful employment. If a claim of permanent or temporary disability is questionable, verification must be provided.

(G) Students:

A student enrolled at least half-time (as defined by the school, program, or institution) in any recognized school, training program, or institution of higher education. Students enrolled at least half-time in an institution of higher education must meet the student eligibility requirements listed in **Section 7.4 Students**. A student will remain exempt during normal periods of class attendance, vacation, and recess. If the student graduates, enrolls less than half-time, is suspended or expelled, drops out, or does not intend to register for the next normal school term (excluding summer), the Agency must work register the individual, unless the individual qualifies for another exemption.

(H) Unemployment Compensation Recipients:

A person receiving unemployment compensation. A person who has applied for, but is not yet receiving, unemployment compensation is also exempt if that person is complying with work requirements that are part of the unemployment compensation application process.

If the exemption claimed is questionable, the Agency is responsible for verifying the exemption with the appropriate office of the Employment Security Commission.

Persons losing exemption status due to any changes in circumstances that are subject to the reporting requirements of **Chapter 15 Change Reporting Requirements** must register for employment when the change is reported. The Agency must annotate the change to the member's exemption status on the most recent application/ recertification/ semiannual form. Those persons who lose their exemption due to a change in circumstances that is not subject to the reporting requirements of **Chapter 15 Change Reporting Requirements** must register for employment at their household's next recertification.

8.3 THE AGENCY'S RESPONSIBILITIES FOR WORK REGISTRATION

The Agency must register for work each household member not exempted by the provisions of **Section 8.2 Exemptions from Work Requirements**. As part of the work registration process, the Agency must explain to the individual the pertinent work requirements, the rights and responsibilities of work-registered household members, and the consequences of failure to comply.

The Agency must provide a written statement of the above to each individual in the household who is registered for work. A notice must also be provided when a previously exempt individual or new household member becomes subject to a work requirement, and at recertification.

Persons subject to simplified reporting requirements as specified in **15.3 Simplified Reporting Households** who lose their exemption due to a change in circumstances that is not required to be reported, must be work registered at the household's next recertification.

Household members are considered to have registered when the DSS Form 3800 is signed and filed and the registration is recorded on the CHIP EMPR screen.

8.4 E&T PROGRAM REFERRALS

In addition to the work registration conditions outlined in **Section 8.3, The Agency's Responsibilities For Work Registration**, certification workers will make a determination of work registrants who are ABAWDS (See **Section 9.1 The SNAP Employment and Training Program (E&T)** which do not meet an E & T specific exemption **(See Section 9.2 E&T Program Exemptions)**. ABAWDS must participate in the SNAP 2 WORK program and must be provided an explanation of their rights and responsibilities as work registrants. This must be explained during the application/ recertification interview. (See **Section 9.3 Referrals to the SNAP 2 WORK Program**).

8.5 FAILURE TO COMPLY WITH SNAP WORK REQUIREMENTS

A nonexempt individual who refuses or fails without good cause, as defined in **Section 8.10 Good Cause**, to comply with the SNAP work requirements listed under **Section 8.1 Work Requirements** is ineligible to participate in the SNAP, and will be considered an ineligible household member.

An individual exempt from SNAP work requirements because he or she is subject to work requirements under Family Independence (TANF) or unemployment compensation who fails to

comply with a Family Independence (TANF) or unemployment compensation work requirement will be treated as though he or she failed to comply with the SNAP work requirement. When a household reports the loss or denial of Family Independence (TANF) or unemployment compensation benefits, or if the Agency otherwise learns of a loss or denial, the Agency must determine whether the loss or denial resulted when a household member refused or failed without good cause to comply with a Family Independence (TANF) or unemployment compensation work requirement.

If the Agency determines that the loss or denial of benefits resulted from an individual's refusal or failure without good cause to comply with a Family Independence (TANF) or unemployment compensation requirement, the individual must be disqualified in accordance with the applicable provisions of **Section 8.6 Disqualification Periods for Failure to Comply with Work Requirements**.

However, if the non-complying individual meets one of the work registration exemptions provided in **Section 8.2 Exemptions from Work Requirements** (other than exemptions **(E)** or **(H)** the individual will not be disqualified.

As soon as the State agency learns of the individual's noncompliance it must determine whether good cause for the noncompliance exists, as discussed in **Section 8.9 Good Cause**. Within 10 days of establishing that the noncompliance was without good cause, the Agency must provide the individual with a notice of adverse action. The notice of adverse action must meet the timeliness and adequacy requirements **Chapter 16 Notice of Adverse Action.**

The notice of adverse action must contain the particular act of noncompliance committed and the proposed period of disqualification. The notice must also specify that the individual may, if appropriate, reapply at the end of the disqualification period. Information must be included on or with the notice describing the action that can be taken to avoid the disqualification before the disqualification period begins.

The disqualification period must begin with the first month following the expiration of the 10-day adverse notice period, unless a fair hearing is requested. If the individual complies before the end of the advance notice period, the Agency will cancel the adverse action.

A notice of adverse action must be sent whenever the Agency becomes aware of an individual's noncompliance with SNAP work requirements, even if the disqualification begins after the certification period expires and the household has not been recertified.

8.6 DISQUALIFICATION PERIODS FOR FAILURE TO COMPLY WITH SNAP WORK REQUIREMENTS

The following disqualification periods will be imposed:

(A) For the first occurrence of noncompliance, the individual will be disqualified until:

- One Month; **and**
- The date the individual agrees to comply, as determined by the Agency

(B) For the second occurrence, until:
- Three Months; **and**
  The date the individual agrees to comply, as determined by the Agency

(C) For the third or subsequent occurrence, until:
- Six Months; **and**
- The date the individual agrees to comply, as determined by the Agency

Note: *Compliance* means compliance with work registration. This means the household has initiated work registration with the agency by either requesting to be added back to the budget or filing an application if the case is closed or recertification if due.

A SNAP recipient who fails to comply with FI work requirements must comply with FI work requirements or become exempt from FI to become eligible for SNAP.

The Agency must retain case records concerning the frequency of noncompliance with SNAP work requirements and the resulting disqualification actions imposed. These records must be available for inspection and audit at any reasonable time to ensure conformance with the minimum mandatory disqualification periods instituted.

8.7 FAIR HEARINGS FOR FAILURE TO COMPLY WITH SNAP WORK REQUIREMENTS

Each individual has the right to request a fair hearing, in accordance with **Chapter 18 Fair Hearings**, to appeal a denial, reduction, or termination of benefits due to a determination of nonexempt status, or an Agency determination of failure to comply with SNAP work requirements.

Individuals or households may appeal Agency actions such as exemption status, the type of requirement imposed, or an Agency refusal to make a finding of good cause if the individual believes that a finding of failure to comply has resulted from improper decisions on these matters. The results of the fair hearing are binding on the Agency.

8.8 ENDING DISQUALIFICATIONS FOR FAILURE TO COMPLY WITH SNAP WORK REQUIREMENTS

At the end of the applicable mandatory disqualification period for noncompliance with SNAP work requirements, participation may resume if the disqualified individual applies again and is determined by the Agency to be in compliance with work requirements. A disqualified individual may be permitted to resume participation during the disqualification period (if otherwise eligible) by becoming exempt from work requirements.

8.9 SUITABLE EMPLOYMENT

Employment will be considered suitable unless:

(A) The wage offered is less than the highest of the applicable Federal minimum wage or the applicable State minimum wage;
(B) The employment offered is on a piece-rate basis and the average hourly yield the employee can reasonably be expected to earn is less than the applicable hourly wages specified under (A) above;
(C) The household member, as a condition of employment or continuing employment, is required to join, resign from, or refrain from joining any legitimate labor organization.
(D) The work offered is at a site subject to a strike or lockout at the time of the offer unless the strike has been enjoined under section 208 of the Labor-Management Relations Act (29 U.S.C. 78) (commonly known as the Taft-Hartley Act), or unless an injunction has been issued under section 10 of the Railway Labor Act (45 U.S.C. 160); or

In addition, employment will be considered suitable unless the household member involved can demonstrate or the Agency otherwise becomes aware that:

(E) The degree of risk to health and safety is unreasonable;
(F) The member is physically or mentally unfit to perform the employment, as documented by medical evidence or by reliable information from other sources;
(G) The employment offered within the first 30 days of registration is not in the member's major field of experience;
(H) The distance from the member's home to the place of employment is unreasonable considering the expected wage and the time and cost of commuting. Employment will not be considered suitable if daily commuting time exceeds 2 hours per day, not including the transporting of a child to and from a child care facility. Nor will employment be considered suitable if the distance to the place of employment prohibits walking and neither public nor private transportation is available to transport the member to the jobsite; or.
(I) The working hours or nature of the employment interferes with the member's religious observances, convictions, or beliefs.

8.10 GOOD CAUSE

The Agency is responsible for determining good cause when a SNAP recipient fails or refuses to comply with SNAP work requirements. The Agency must take into account the facts and circumstances, including information submitted by the employer and by the household member involved, in determining whether or not good cause exists.

Good cause includes circumstances beyond the member's control, such as, but not limited to, illness, illness of another household member requiring the presence of the member, a household

emergency, the unavailability of transportation, or the lack of adequate child care for children who have reached age six but are under age 12.

Good cause for leaving employment includes the good cause provisions found below and resigning from a job that is unsuitable as specified in **Section 8.9 Suitable Employment**. Good cause for leaving employment also includes:

(A) Discrimination by an employer based on age, race, sex, color, disability, religious beliefs, national origin or political beliefs;
(B) Work demands or conditions that render continued employment unreasonable, such as working without being paid on schedule;
(C) Acceptance of employment by the individual, or enrollment by the individual in any recognized school, training program or institution of higher education on at least a half time basis, that requires the individual to leave employment;
(D) Acceptance by any other household member of employment or enrollment at least half-time in any recognized school, training program or institution of higher education in another county or similar political subdivision that requires the household to move and thereby requires the individual to leave employment;
(E) Resignations by persons under the age of 60 which are recognized by the employer as retirement;
(F) Employment that becomes unsuitable, as specified **Section 8.8 Suitable Employment**, after the acceptance of such employment;
(G) Acceptance of a bona fide offer of employment of more than 30 hours a week or in which the weekly earnings are equivalent to the Federal minimum wage multiplied by 30 hours that, because of circumstances beyond the individual's control, subsequently either does not materialize or results in employment of less than 30 hours a week or weekly earnings of less than the Federal minimum wage multiplied by 30 hours; and
(H) Leaving a job in connection with patterns of employment in which workers frequently move from one employer to another such as migrant farm labor or construction work. There may be some circumstances where households will apply for SNAP benefits between jobs particularly in cases where work may not yet be available at the new job site. Even though employment at the new site has not actually begun, the quitting of the previous employment must be considered as with good cause if it is part of the pattern of that type of employment.

To the extent that the information given by the household is questionable, as defined in **5.2 Verification of Questionable Information**, the Agency must request verification of the household's statements of good cause. The primary responsibility for providing verification, as provided in **5.4 Responsibility for Obtaining Verification**, rests with the household.

8.11 VOLUNTARY QUIT AND REDUCTION OF WORK EFFORT

(1) Individual ineligibility

An individual is ineligible to participate in the SNAP if 60 days before applying for SNAP benefits or at any time thereafter, the individual:

(A) Voluntarily and without good cause quits a job of 30 hours a week or more; or
(B) Reduces his or her work effort voluntarily and without good cause and, after the reduction, is working less than 30 hours per week.

(2) Voluntary quit provisions

The voluntary quit provision applies if the employment involved 30 hours or more per week or provided weekly earnings at least equivalent to the Federal minimum wage multiplied by 30 hours; the quit occurred within a period of 60 days prior to the date of application or anytime thereafter; and the quit was without good cause.

- Changes in employment status that result from terminating a self-employment enterprise or resigning from a job at the demand of the employer will not be considered a voluntary quit for purposes of this section.
- An employee of the Federal Government, or of a State or local government who participates in a strike against such government, and is dismissed from his or her job because of participation in the strike, will be considered to have voluntarily quit his or her job without good cause.
- If an individual quits a job, secures new employment at comparable wages or hours and is then laid off or, through no fault of his own, loses the new job, the individual must not be disqualified for the earlier quit.

(3) Reduction of work effort provision

The reduction of work effort provision applies if, before the reduction, the individual was employed 30 hours or more per week; the reduction occurred within a period of 60 days prior to the date of application or anytime thereafter; and the reduction was voluntary and without good cause. If the individual reduces his or her work hours to less than 30 a week, but continues to earn weekly wages that exceed the Federal minimum wage multiplied by 30 hours, the individual remains exempt from SNAP work requirements, in accordance with **Section 8.2 Exceptions from Work Requirements (D)**, and the reduction in work effort provision does not apply.

Minor variations in the number of hours worked or in the weekly minimum wage equivalent wages are inevitable and must be taken into consideration when assessing a recipient's compliance with SNAP work rules.

(4) Determining whether a voluntary quit or reduction of work effort occurred

When a household files an application for participation, or when a participating household reports the loss of a source of income or a reduction in household earnings, the Agency must determine whether any household member voluntarily quit his or her job or reduced his or her work effort. Benefits must not be delayed beyond the normal processing times specified in **Chapter 6 Supplemental Nutrition Assistance Program (SNAP): Processing Standards** pending the outcome of this determination.

In the case of an applicant household, the Agency must determine if any household member subject to SNAP work requirements voluntarily quit his or her job or reduced his or her work effort within 60 days prior to date of application. If the Agency is notified that a household has lost a source of income or experienced a reduction in income after the date of application but before the household is certified, the Agency must determine whether a voluntary quit or reduction in work effort occurred.

Upon determining that an individual voluntarily quit employment or reduced work effort, the Agency must determine if the voluntary quit or reduction of work effort was with good cause as defined in **Section 8.9 Good Cause**.

In the case of an individual who is a member of an applicant household, if the voluntary quit or reduction in work effort was without good cause, the individual will be determined ineligible to participate and will be disqualified according to **Section 8.6 Disqualification Periods for Failure to Comply with SNAP Work Requirements**. The ineligible individual must be considered an ineligible household member (see **Section 2.3 Ineligible Household Members**).

The disqualification is effective upon the determination of eligibility for the remaining household members.

In the case of an individual who is a member of a participating household, if the Agency determines that the individual voluntarily quit his or her job or reduced his or her work effort without good cause while participating in the SNAP or discovers that the individual voluntarily quit his or her job or reduced his or her work effort without good cause 60 days prior to the date of application for SNAP benefits or between application and certification, the Agency must provide the individual with a notice of adverse action within 10 days after the determination of a quit or reduction in work effort.

The notification must contain the particular act of noncompliance committed, the proposed period of ineligibility, the actions that may be taken to avoid the disqualification, and it must specify that the individual, if otherwise eligible, may resume participation at the end of the disqualification period if the Agency determines the individual to be in compliance with SNAP work requirements. The individual will be disqualified according to **Section 8.6 Disqualification Periods for Failure to Comply with SNAP Work Requirements**.

The ineligible individual must be considered an ineligible household member (see **Section 2.3 Ineligible Household Members**). The disqualification period will begin the first month following the expiration of the 10-day adverse action notice period, unless the individual requests a fair hearing and is entitled to continued benefits. Generally, the sanction should be imposed the month following the month the voluntary quit occurred and is verified.

If a voluntary quit or reduction in work effort occurs in the last month of a certification period, or is determined in the last 30 days of the certification period, the individual must be denied recertification for a period equal to the appropriate mandatory disqualification period, beginning with the day after the last certification period ends and continuing for the length of the disqualification, regardless of whether the individual reapplies for SNAP benefits.

(5) Right to a fair hearing

Each individual has a right to a fair hearing to appeal a reduction, denial or termination of benefits due to a determination that the individual voluntarily quit his or her job or reduced his or her work effort without good cause. If the participating individual's benefits are continued pending a fair hearing and the Agency determination is upheld, the disqualification period must begin the first of the month after the hearing decision is rendered.

(6) Ending a voluntary quit or a reduction in work disqualification

Following the end of the mandatory disqualification period for voluntarily quitting a job or reducing work effort without good cause, an individual may begin participation in the program if he or she reapplies and is determined eligible by the Agency.

Eligibility may be reestablished during a disqualification and the individual, if otherwise eligible, may be permitted to resume participation if the individual becomes exempt from SNAP work requirements under **Section 8.2 Exceptions from Work Requirements**

(7) Application in the final month of disqualification

If an application for participation in the SNAP is filed in the final month of the mandatory disqualification period, the Agency must use the same application for the denial of benefits in the remaining month of disqualification and certification for any subsequent month(s) if all other eligibility criteria are met.

Chapter 9

Chapter 9 Employment and Training Program (E &T)

9.1 THE SNAP 2 WORK PROGRAM

The Agency provides an opportunity for all applicants/recipients of the SNAP to participate in the SNAP 2 WORK Program, South Carolina's Employment and Training Program (E&T). The purpose of the SNAP 2 WORK program is to assist SNAP recipients by improving their ability to obtain regular employment and reduce their dependency on public assistance. Those recipients determined as Able Bodied Adults without Dependents (ABAWDS) in designated counties will be **mandatory** and must be referred to the SNAP 2 WORK Program. Non ABAWDS and those residing in non-designated counties may volunteer for the E &T program.

ABAWDS are SNAP household members who are ~~who are~~:

- Able-bodied, and
- At least 18 years of age but under age 50, and
- Have no dependents

Persons who meet an exemption from the work requirements as specified in **Section 8.2, Exemptions from Work Requirements** will not be referred to the SNAP 2 WORK program.

The certification worker will provide SNAP 2 WORK resource information and referral services to all households, both mandatory as well as those exempt, at application, annual recertification, and when an individual meeting the definition of an ABAWD is added to a SNAP household. The certification worker will discuss and record the work registration status **(Section 8.3 The Agency's Responsibilities for Work Registration)** of each household member and will advise the household of work registration requirements and penalties. The certification worker will use E&T brochures to provide an explanation of the opportunities available to the household through the state's E&T Program.

SNAP Work Registrants who are ABAWDS residing in the counties listed in **SNAP Tool Kit Attachment 7: SNAP 2 WORK Referral Guide** must be referred to the SNAP 2Work program.

9.2 E&T PROGRAM EXEMPTIONS

ABAWDS not meeting work registration exemption requirements may be determined exempt from SNAP 2 WORK if one of the following E & T specific exemptions apply:

- Ill or Incapacitated: Persons who are ill or incapacitated when the illness or injury is serious enough to prevent the person from engaging in employment for at least 60 days. If a claim of permanent or temporary illness or incapacity is questionable, the participant is responsible for providing verification.
- Vocational Rehabilitation Participant (VR): Persons who are active VR clients.
- Pregnant (Second Trimester)
- Sheltered Workshop Employees: Persons working less than 30 hours per week in a sheltered workshop, or working to their maximum capacity as verified by a physician, licensed psychologist, vocational rehabilitation specialist, or mental health clinician.
- Substantial Barriers: Persons who lack job readiness to successfully complete a job search, or who lack the ability to successfully complete an E&T Program component. Job readiness is defined as the ability to engage in a job search and, if successful, reliably carry out work tasks assigned by the employer. Persons whose physical or mental condition would prohibit successful job search have "substantial barriers" to employment.
- ABAWD Meeting Work Requirement: Employed at least 30 hours per week, participating in employment and training activities other than those funded under SNAP E&T (i.e., self-initiated WIA or TAA) at the time of the initial SNAP certification or recertification, or a student 18 years old or older enrolled in high school.

9.3 REFERRALS TO THE SNAP 2 WORK PROGRAM

1. Mandatory Participants (ABAWDS)

Certification workers will identify SNAP recipients for SNAP 2 WORK at initial application, annual review, and when a new individual has been added to the SNAP household (including a previously sanctioned individual) using the following criteria:

(1) The SNAP recipient is a mandatory work registrant who does not meet a work registration exemption listed in **Section 8.2 Exemption From Work Requirements**

(2) The SNAP recipient meets the definition of ABAWD (see **Section 9.1 The SNAP 2 WORK Program**)

(3) The SNAP recipient does not meet an E & T specific exemption (see **Section 9.2 E&T Program Exemptions**)

These individuals ***must*** participate in the SNAP 2 WORK program and ***must*** be referred to SNAP 2 WORK by the certification worker. The determination of their status is based on information provided and verified during the intake/recertification process, and when an individual meeting the definition of an ABAWD is added to a SNAP household.

ABAWD work registrants must be provided an explanation of their rights and responsibilities as a work registrant and the requirement to participate in E & T. This must be explained during the application/ recertification interview. Notification of the mandatory ABAWD's requirement to participate must also be included in the application/recertification approval notice. Certification workers must select the appropriate notice and enter the name of the SNAP 2 WORK referral contact, and phone number, which corresponds to the county in which the ABAWD resides (See **SNAP Tool Kit Attachment 7: SNAP 2 WORK Referral Guide**). The ABAWD is instructed in this notice to call the named contact within 10 days of receipt of the notice to schedule the initial appointment which will begin the ABAWD's participation.

The certification worker will electronically transmit the referral to the SNAP 2 WORK Program Coordinators and other providers using the SNAP ET Database. This database can be accessed by selecting the "Sign In" located at the bottom right hand corner of the DSS Homepage and signing in. All required data must be entered to complete the referral.

Note: South Carolina has a waiver for the entire state that exempts ABAWDS from the 3 month out of 36- month time limit. However, ABAWDs who reside in the counties listed in **SNAP Tool Kit Attachment 7: SNAP 2 WORK Referral Guide** are still subject to SNAP 2 WORK requirements and must participate in the program. The certification worker should refer to the **SNAP Tool Kit Attachment 7: SNAP 2 WORK Referral Guide** to determine the appropriate SNAP 2 WORK contact for referral purposes.

2. Volunteers

Non-ABAWDS as well as clients **not residing** in a mandatory SNAP 2 WORK county are exempt from participation in the SNAP 2 WORK Program even though they may be mandatory work registrants. Though exempt, these individuals, including those who are exempt from work registration, may volunteer for participation in the E&T program.

9.4 FAILURE TO COMPLY WITH SNAP 2 WORK PROGRAM REQUIREMENTS

A mandatory SNAP 2 WORK who fails to appear for a scheduled appointment and fails to contact the designated case manager with a "good cause" explanation is non-compliant. A mandatory

SNAP 2 WORK participant (ABAWD) who fails to complete an assigned work activity per the SNAP 2 WORK Employment Plan is also non-compliant, unless good cause is shown. Participants are required to contact the designated case manager or provider on the day of an absence to provide "good cause" for failing to appear for a scheduled appointment or activity.

1) Non-compliance Notification

Mandatory participants who fail to comply with SNAP 2 WORK requirements will be provided written notification of non-compliance and given an opportunity to establish good cause. The assigned case manager or provider will issue the Non-Compliance notice to the client by the close of business on the day the non-compliant activity occurs. If good cause is not established within 10 days of the date the notice of non-compliance was mailed, the assigned case manager or provider will notify designated eligibility staff in the State Office of the non-compliance and the need to impose a sanction. This notification will be provided to the designated eligibility staff on the close of business on the 10th day following the act of noncompliance.

2) Notice of Adverse Action

It is the responsibility of the designated SNAP eligibility staff in the State Office to initiate the 10 day Notice of Adverse Action upon receiving a sanction referral from the assigned case manager or provider for non-compliant recipients. The disqualification/sanction will become effective on the first day of the month following the expiration of the 10 day notice of adverse action period. Change reporting requirements in **Section 15.4 Interim Changes for Simplified Reporting Households** do not apply when imposing a sanction for failure to comply with SNAP 2 WORK. The sanction must be imposed effective the month following the expiration of the 10 day adverse action period regardless of whether it causes a decrease in the SNAP allotment.

3) Disqualification Periods

Disqualification periods for failure to comply with SNAP E&T requirements are as follows:

(A) For the first occurrence of noncompliance, the individual will be disqualified until:
- One Month; **and**
- The date the individual agrees to comply,

(B) For the second occurrence, until:
- Three Months; **and**
- The date the individual agrees to comply,

(C) For the third or subsequent occurrence, until:
- Six Months; **and**
- The date the individual agrees to comply,

For an individual to comply, the household must do one of the following:

1. Request to be added back to the budget, **or**
2. File an application if the case is closed, **or**
3. Submit a recertification, if due.

The individual must also agree to comply with the SNAP 2 WORK requirements.

At the end of the applicable disqualification time period for noncompliance with the SNAP 2 WORK program, the disqualification may be lifted, and the individual may resume SNAP participation (added back to the SNAP budget), provided that the disqualified individual agrees to comply with the SNAP 2 WORK program requirements. The disqualification will also be lifted if the disqualified individual becomes exempt by no longer meeting the definition of an ABAWD.

Note: The eligibility worker is responsible for making the determination as to whether the sanctioned individual may resume participation in SNAP. Once the sanctioned individual has been approved, or added back into a household, the individual should be referred back to the SNAP 2 WORK program.

Clients contacting county eligibility staff regarding their sanctions should be referred to the designated eligibility staff in the State Office.

9.5 JOB DUTIES OF THE SNAP EMPLOYMENT AND TRAINING (E&T) COORDINATOR

The job duties of the E&T Coordinator include the following:

(A) Develop and implement an employment and placement strategy for E&T participants for their assigned county(ies);

(B) Coordinate with Work Force Development staff and employers to develop part-time and full-time employment for their clients;

(C) Coordinate with Work Force Development staff and employers and local training providers to develop needed training opportunities for in-demand jobs;

(D) Establish and maintain partnerships with the community, business, education, faith organizations and other leaders to facilitate communication, coordination and collaborative efforts; and

(E) Track, collect, compile, analyze, interpret and incorporate findings of local economic and labor market information in efforts to identify jobs in demand, occupational requirements, hiring trends and employment opportunities for their clients.

9.6 SNAP 2 WORK PROGRAM COMPONENTS

The following outlines information for the specific components offered in the SNAP 2 WORK Program:

(1) Job Search

Job Search will typically be the first assignment for most mandatory SNAP 2 WORK participants. Job Search requires an SNAP 2 WORK participant to make a specified number of job contacts with different prospective employers. The job search begins on a date agreed upon by the SNAP 2 WORK participant and the assigned case manager or provider. The Job Search period will typically begin after the completion of orientation and assessment activities.

(2) Job Search Training

Job search training will provide meaningful assistance to SNAP recipients helping to improve their ability to get a job. Job search training activities will be conducted locally based on the available resources and will be designed to meet the needs of job seekers and employers. Contractors or TPRP Partners may deliver training in group sessions and workshops or on an individual basis. Activities may include, but are not limited to:

- Employability skills;
- Interpersonal skills;
- Basic job search skills (submitting paper applications, internet based applications,
- Job retention skills;
- Interviewing skills;
- Appropriate dress;
- Resume development; and
- Career assessments
- Guidance and motivation for development of positive work behaviors necessary for the labor market

(3) Vocational Training

This component provides vocational training, or equivalent knowledge and skills required in a specific occupational area. The State Agency has entered into agreements with Technical Colleges serving the state to provide a variety of services including assessment, case management, and employment-focused vocational training opportunities to SNAP 2 WORK participants. The Vocational training component focus will be on the Quick Jobs with a Future Program and other certificate and non-certificate programs which allow these adults to quickly obtain skills matching the needs of local business and industry. Quick Jobs and other certificate programs have been developed for fields where job growth is expected and in consultation with local employers. The Quick Jobs program offers training and certifications that are skills specific and job preparatory with most courses lasting three months or less and all less than a year.

(4) Education

The Education component is designed to increase employability by providing remedial education as well as post-secondary education leading to a degree or certification. The South Carolina Office of Adult Education has entered into an agreement with DSS to assist SNAP E&T adults in the completion of a secondary school education; to become literate and obtain the knowledge and skills necessary for employment and self-sufficiency; and to help adults with limited English proficiency. Local Adult Education offices will provide the following services:

- Basic Education. Adult basic education includes instruction for adults with the lowest skills through eighth-grade. Instruction includes reading, writing, mathematics, and life skills.
- English as a Second Language (ESL). Instruction includes reading, writing, and speaking English. ESL classes may include life-skills training and language courses to enhance an individual's employability and his or her prospects for job retention or advancement.
- Family Literacy. Literacy training that leads to economic self-sufficiency.
- Workplace Skill Enhancement. Contextual basic skills instruction as it applies to job-specific training, pre-employment training, or skills upgrading designed to meet the needs of the employer and addresses the competencies necessary for success in the workplace.
- General Educational Development (GED). Instruction designed to prepare students to successfully complete the GED examination, including language arts, writing, mathematics, science, and social studies.
- High School Diploma. High school diplomas can be earned through adult education programs that are operated by school districts in South Carolina.

(5) Workforce Investment Act (WIA) Activities

The Workforce Investment Act (WIA) in South Carolina supports training programs that help job seekers prepare for employment and businesses access skilled workers. WIA services are delivered through the state's comprehensive SC Works system. SC Works Centers in most counties offer job seekers and businesses access to employment and training opportunities, as well as other services provided by SC Works system partner agencies that support employment and training.

WIA establishes three (3) levels of employment and training services for adults and dislocated workers: core, intensive, and training. A WIA eligibility determination is required when a job seeker needs staff-assisted services to obtain or retain employment. As a job seeker moves through the service levels, additional requirements must be met to show that the job seeker is appropriate for the next level of service, and requires that level of service to obtain or retain employment.

All job seekers are eligible to receive core services. Intensive services are available to unemployed job seekers who have been unable to obtain jobs through core services and to those who are employed but need additional intensive services to reach self-sufficiency. Training services are available for those job seekers who have been unable to find employment through intensive services.

SNAP recipients that are not mandatory for participation in SNAP 2 WORK program but volunteer to participate in the program will be referred to their nearest SC Work Center for job search assistance. SNAP 2 WORK Coordinators will provide appropriate assistance to job seekers in order to ensure that clients fully maximize the services available to them. E&T providers serving mandatory participants may also utilize the services available through the Work Centers as they deem appropriate.

9.7 REIMBURSEMENT FUNDS FOR EMPLOYMENT AND TRAINING (E&T) PROGRAM PARTICIPANTS

The E&T Coordinator may authorize reimbursement funds to E&T participants who are mandatory for participation in the target counties as well as those who volunteer statewide.

(A) The Agency will provide reimbursement funds for participants needing reimbursement for transportation up to $50 monthly during component participation. Transportation reimbursement will be paid directly to the provider or directly to the participant for expenses incurred for transportation.

(B) South Carolina will provide reimbursement funds for one-time component related expenses up to $50 for participants needing such provided the client participated in an FSE&T component for that month.

One time component related expenses will be paid directly to the provider.

Note: Due to limited state funding available, it is recommended that the reimbursement for the Job Search component participation be limited to $25 monthly. If a participant can provide documented transportation costs in excess of $25 monthly, the additional cost up to the cap of $50 may be reimbursed.

9.8 RECORD KEEPING FOR THE SNAP 2 WORK PROGRAM

Participation in an SNAP 2 WORK component will be tracked and recorded each month by assigned case managers and providers in the **SCDSS E&T Tracking System** for mandatory ABAWDS and by SNAP 2 WORK Coordinators for volunteers. South Carolina will monitor county SNAP 2 WORK functions to make sure all requirements are followed in accordance with Federal E&T regulations, as well as state policy.

Chapter 10

Chapter 10 Resource Eligibility Standards

Chapter 10 has been moved to Appendix 2.

Chapter 11

Chapter 11 Income

11.1 INCOME ELIGIBILITY STANDARDS

Participation in the SNAP will be limited to those households whose incomes are determined to be a substantial limiting factor in permitting them to obtain a more nutritious diet. Households which contain an elderly or disabled member will meet the net income eligibility standards for the SNAP. Households which do not contain an elderly or disabled member shall meet both the net income eligibility standards and the gross income eligibility standards for the SNAP. Households which are categorically eligible as defined in **Section 4.1 Categorically Eligible Households** do not have to meet either the gross or net income eligibility standards. The net and gross income eligibility standards shall be based on the Federal income poverty levels established as provided in section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2)).

(1) Gross income eligibility standards

Gross income means a household's total, non-excluded income, before any deductions have been made. The gross income eligibility standards for the SNAP will be 130 percent of the Federal income poverty level.

NOTE: 130 percent of the annual income poverty guidelines will be divided by 12 to determine the monthly gross income standard, rounding the results upwards as necessary.

(2) Net income eligibility standards

Net income means gross income minus allowable deductions. The net income eligibility standards for the SNAP will be the Federal income poverty level.

NOTE: The annual income poverty guidelines will be divided by 12 to determine the monthly net income eligibility standards, rounding the results upward as necessary.

The income eligibility standards are revised each October 1 to reflect the annual adjustment to the Federal income poverty guidelines. The monthly gross and net income eligibility standards are prescribed in the table below.

Household size	Gross monthly income (130 percent of poverty)	Net monthly income (100 percent of poverty)
1	$1276	$981
2	$1726	$1328
3	$2177	$1675
4	$2628	$2021
5	$3078	$2368
6	$3529	$2715
7	$3980	$3061
8	$4430	$3408
Each additional member	$451	$347

11.2 DEFINITION OF INCOME

Household income will mean all income from whatever source excluding only items specified in **Section 11.6 Income Exclusions**. The income of all BG members is counted unless specifically disregarded or excluded.

11.3 EARNED INCOME

Earned income is all money earned by a household member(s) through receipt of wages, salary, tips or commissions as an employee. Income earned directly from one's own business, trade or profession rather than specified as salary or wages from an employer is considered self-employment income. For treatment of self-employment income, see **Section 11.4 Self-employment Income**. Earned income is allowed certain deductions as listed in **Section 12.2 Earned Income Deduction**. Earned income will include:

Earned Income	Description	*NOTE/Exception:*
(A) Advances	**Count if an advance on wages.**	***Exception: Exclude if an advance on travel (in addition to wages).***
(B) Agriculture payments (ASCS, etc.) Includes Commodity **Credit Corporation and acreage reduction and conservation payments.**	**Count total amount. Other ASCS one-time and installment payments made to farmers for crop or other losses are self-employment income (annualize for self-employed BG).**	***EXCEPTION: ASCS payments made as a result of a Presidentially declared disaster or emergency are excluded from income and resources.***
(C) AmeriCorps State and National	**Exclude total amount of living allowance**	

(D) AmeriCorps VISTA	**Exclude living allowance if individual was receiving SNAP/FI benefits prior to beginning service.** **Include living allowance as earned income if individual was NOT receiving SNAP/FI benefits prior to beginning service.**	
(D) Blood, sale of	**Treat as self-employment income. See Section 11.4 Self-employment Income.**	
(E) Boarder payments	**Payments from a boarder will be considered self-employment income. See Section 11.4 Self-employment Income.**	***Exception: Foster care boarders***
(F) Bonuses	**Count if reasonably anticipated.**	
(G) Cafeteria plans	**Money withheld from an employee's earnings to pay certain expenses such as a vendor payment to a third party when the expenses are incurred must be counted as earned income when withheld. The money is legally obligated and otherwise payable to the employee at that time.**	
(H) Capital gains (from sale of self-employment goods or equipment)		
(I) Census Income for temporary employees connected with the 2010 Census	**This income is excluded.**	
(J) Child Care and Development Block Grant (CCDBG) payments (this includes the ABC Child Care Voucher System)	**Payments to an individual providing the child care are counted as earned income to that individual.**	***Exception: Payments provided as vouchers are excluded by federal law to the BG containing the child or children.***
(K) Children's earnings, age 17 or younger		***Exception: Exclude if a child lives with a natural, adoptive or stepparent or under the parental control of another household member and*** • ***Attends either elementary /secondary school or classes recognized, operated or supervised by the student's state or local school district to obtain a GED, or*** • ***Attends elementary/ secondary classes through a home school program recognized or supervised by the student's state or local school district.*** ***NOTE: The income is excluded during a temporary***

		interruption in school attendance providing the student intends to return. ***A child who meets the above criteria must have his/her earned income budgeted the month after the child turns 18 years of age.*** ***If a child's income cannot be distinguished from that of other household members, the total earnings must be prorated equally between the working members and the child's share excluded.***
(L) Domestic Volunteer Service Act payments (includes University Year for Action, Urban Crime Prevention Program, VISTA)	**This income is excluded.**	***Exception: Include payments as earned income if individual was NOT receiving SNAP/FI benefits prior to beginning volunteer service.***
(M) Educational Assistance	**This income is excluded in accordance with SC Medicaid Policy**	
(N) Employee's share of taxes/FICA paid by employer		
(O) Flexible credits/flexible benefit dollars	**Credits made available to employees for things such as insurance or leave where the employee cannot elect to receive a cash payment in lieu of the credit are not counted as income as they are not legally obligated and otherwise payable to the employee as earnings.** **However, any amount the employer pays over and above the amount of credits must be counted. This amount must be added to the gross taxable income to derive the SNAP gross income.**	
(P) Food assistance (value of) under National School Lunch Act	**Count amount provided to day care providers for children other than their own as self-employment income. See Section 11.4 Self-employment Income.**	***Exception: Exclude assistance provided to children.***
(Q) Foster Grandparent Programs	**Exclude total amount of living allowance if the program is approved by the Corporation for National and Community Service (CNCS)**	***Exception: If the program is not approved by CNCS, this income is not excludable and must be counted as earned income.***
(R) Garnished income from wages or salaries		

(S) Military Pay	**Military pay is counted as income for the month intended rather than for the month received. Count the following as earned income:** • **Military housing and subsistence allowances if shown on the individual's wage statement.** • **Basic Allowance for Housing (BAH)** • **Basic Allowance for Subsistence (BAS)** • **Family Subsistence Supplemental Allowance (FSSA)** • **Leave or separate rations** • **Regular sea pay (count for enlisted personnel)** • **Career sea pay (count for enlisted personnel who are in pay grade E4 or above and have served more than three cumulative years of sea duty** • **National Guard pay**	***Exception: Exclude pay received by military personnel as a result of deployment to a combat zone for the duration of the deployment if it was not received immediately prior to serving in the combat zone. Also exclude any of this income the household has access to, for example, through allotments or deposits to joint bank accounts.*** ***Exclude Clothing Maintenance Allowance (CMA) and consider a reimbursement. Deduct CMA from gross earned income.*** ***Exclude any amount by which the basic pay of an individual is reduced for purposes of funding the Veterans' Educational Act of 1984 (GI Bill)***
(T) Rental property income only if a member of the household is actively engaged in the management of the property at least an average of 20 hours a week	**Ownership of rental property will be considered a self-employment enterprise according to Section 11.4 Self-employment Income.**	
(U) Repayment – Voluntary or involuntary return of monies owed	**Excluded**	
(V) Roomer payments	**Payments from a roomer will be considered self-employment income according to Section 11.4 Self-employment Income.**	
(W) Retired and Senior Volunteer Programs (RSVP)	**Exclude total amount of living allowance if the program is approved by the Corporation for National and Community Service (CNCS)**	***Exception: If the program is not approved by CNCS, this income is not excludable and must be counted as earned income.***
(X) Self-employment income	**The income from a self-employment enterprise will be included according to Section 11.4 Self-employment Income**	
(Y) Senior Companion Programs	**Exclude total amount of living allowance if the program is approved by the Corporation for National and Community Service (CNCS)**	***Exception: If the program is not approved by CNCS, this income is not excludable and must be counted as earned income.***

(Z) Sick pay benefits paid by employer	**Count as earned income if the employee will return to work.** **See 11.5(NN) for sick pay benefits paid from a source other than the employer.**	***Exception: Count as unearned income if the employee will not return to work.*** **Count as unearned income if sick pay benefits are paid from a source other than the employer. See 11.5 (NN)**
(AA) Social Security (SSA/RSDI): employee's share of taxes paid by employer		
(BB) Third party payments/ vendor payments	**Moneys legally obligated and otherwise payable to the household which are diverted by the provider of the payment to a third party for a household expense shall be counted as income.**	***Exception: Exclude all but wages earned by a BG member that are garnished or diverted by an employer and paid to a third party for a BG's expenses***
(CC) Training allowances connected with an hourly wage or salary	**See (II) if connected to WIA program**	
(DD) Training allowances from vocational and rehabilitative programs	**Training allowances from vocational and rehabilitative programs recognized by Federal, State, or local governments, such as the work incentive program, to the extent they are not a reimbursement will be considered earned income.**	
(EE) Vacation pay	**Count actual/anticipated vacation pay in the month it is to be received.**	
(FF) Vocational rehabilitation payments		***Exception: Exclude vocational rehabilitation payments considered reimbursements.***
(GG) Wages and Salaries	**All wages and salaries of an employee will be considered earned income.**	
(HH) Welfare to Work payments		
(II) WIA educational and training programs **There are many WIA programs which include Summer Youth Employment and Training, Youth Build, and weekly stipends paid under the National Community Service Act (NCSA),**	**Allowances and payments to individuals participating in programs under WIA are excluded**	***Exception:* Earnings to individuals who are participating in on-the-job training programs under section 204(b)(1)(C) or section 264(c)(1)(A) of the Workforce Investment Act (WIA) will be considered earned income, unless the payee is a dependent less than 19 years of age. If the payee is a dependent less than 19 years of age, OJT payments are excluded.**
(JJ) Work Training Allowance (WTA)		

11.4 SELF-EMPLOYMENT INCOME

(1) Treatment of self-employment income

The following describes the treatment of self-employment income:

For self-employment income received from a business enterprise that has been in existence at least a year, average the income over the period the income is intended to cover, even if the household receives income from other sources.
For self-employment income received from a business enterprise that has been in existence less than a year, average the income over the period of time the business has been in operation and project a monthly amount for the certification period.

If there is no change in actual circumstances, use last year's tax return or other source of verification and average over the period the income is intended to cover to determine anticipated amount of income to be counted. On a case-by-case basis, where there are little or no past records to base income for the future, use a best estimate. If the household has experienced a substantial increase/ decrease in business income, calculate the self-employment income on the basis of anticipated earnings. If earnings which reflect the increase/ decrease income are available, use these earnings to anticipate income. If earnings which reflect the increase/ decrease in business are not available, a best estimate must be used based on the amount of pay and the frequency of pay. Examples of substantial increase/ decrease include:

Changes in the nature of the business

- Termination of or starting a new self-employment enterprise

- Reported increases or decreases in income which were not previously considered.

(2) Determining self-employment income

For the period of time over which self-employment income is determined:

(A) Add all gross self-employment income (either actual or anticipated) and capital gains

The following chart will help determine what must be used as income:

Business Structure	IRS Form
Sole Proprietorship	Schedule C Form 1040, Profit or Loss from Business, line 3, Exception to using line 3 only: When there is Other income on line 6, you would add this income to the income on line 3. Also if using

	Schedule C-EZ, line 1 would be used.
Partnership	Form 1065, Return of Partnership Income, line 1c, • prorate to the number of partners (if the partners share equally in the business) or • prorate using the percentage the client owns in the business, See Schedule K-1, (Form 1120S) Part II, F found on line I
Corporations	Form 1120 or Form 1120S (See Below)
Limited Liability Company (LLC) Owners of an LLC are called members. Members may include individuals, corporations, other LLCs, and foreign entities. Also permitted are “single member” LLCs, those having only one owner.	If the only member of the LLC is an ***individual***, the LLC income and expenses are reported on Form 1040, Schedule C, line 3, Schedule E, line 3 & 4, or Schedule F (Profit or Loss From Farming) If the only member of the LLC is a ***corporation***, the LLC income and expenses are reported on the corporation’s return, usually Form 1120 or Form 1120S. Most ***Multiple Member LLCs*** would report income and expenses on a partnership return, Form 1065.

For self-employed households who own an incorporated business, the worker must determine whether this business is legally incorporated and whether the business is considered an "S Corporation". An "S Corporation" is a small closely held family corporation.

1) For legally incorporated businesses that are "S Corporations", the business income will be reported together with the household's other income on Form 1040 and attached schedules. Accordingly, income from the "S Corporation" will be treated as self-employment income and annualized.

   The business information from Form 1120S, U. S. Income Tax Return for an S Corporation, line 1c prorated to the number of partners (if the partners share equally in the business) otherwise prorate using the percentage the client owns in the business, See Schedule K-1 (Form 1120S) Part II, F found on line I.

2) For legally incorporated businesses that are not "S Corporations", income is not treated as self-employment income. If there is a question concerning whether the business is legally incorporated (Inc. will be shown after the name of the business), the worker can inquire on the following website: **http://www.scsos.com/Search%20Business%20Filings**. The worker will budget any amounts distributed to the household as shareholders. In addition, the EW must budget any distributions to the household such as checks made out to cash or household expenses from the corporate checking account as income. This information should be listed on the household's personal tax return.

(B) Deduct 40% of total income from total income derived in (A) to arrive at the self-employment income. The 40% deduction is a mandatory standard deduction given to households who incur allowable self-employment costs. Self-employed households who do not incur any allowable self-employment costs are not eligible to receive the standard deduction

NOTE: The deduction cannot exceed 40% of total self-employment income. Actual costs of business are not allowed.

(C) Divide the remaining amount of self-employment income by the number of months over which the income will be averaged.

This amount is the monthly net self-employment income.

(3) Self-employment costs

To arrive at the net income to be budgeted, the Agency must consider allowable costs of producing the self-employment income by the household. Any household that incurs allowable costs of producing self-employment income are entitled to receive the standard self-employment deduction of 40% of self-employment income.

Actual self-employment costs are not allowed. Allowable costs include:

- Identifiable costs of labor (i.e., salaries, employer share of Social Security insurance)
- Stock, raw materials, seed, fertilizer and feed for livestock
- Cost of feed for work
- Rent and cost of building maintenance
- Business telephone
- Costs of operating a motor vehicle required in connection with the operation of the business
- Payments on the principal of the purchase price of income-producing real estate and capital assets, equipment, machinery, and other durable goods
- Interest paid to purchase income producing property
- Insurance premiums and taxes paid on income producing property
- Internet access fees incurred for businesses selling their goods through the Internet

Costs not allowed include:

- Net losses from previous periods
- Any expenses covered by the earned income deduction in **Section 12.3 Earned Income Deduction**. This includes federal, state, and local income taxes, money set aside for retirement purposes, and other work related personal expenses (such as transportation to and from work).
- Costs of producing home produce intended for family consumption
- Family living expenses
- Entertainment expenses
- Personal debts
- Depreciation expenses except as allowed in capital gains income
- Any amount that exceeds the payment a household receives from a boarder for lodging and meals

11.5 UNEARNED INCOME

Unearned income is any income not defined as earned income. Unearned income will include, but not be limited to:

Included Unearned Income	Description	*NOTE/Exception:*
(A) Adoption subsidy		***Exception: any portion which covers medical care***
(B) Alimony	**Alimony payments made directly to the household from non-household members**	
(C) Annuities		
(D) Assistance payments from Federal or federally aided public assistance programs	**Assistance payments from Federal or federally aided public assistance programs, such as Supplemental Security Income (SSI) or Temporary Assistance for Needy Families (TANF); or other assistance programs based on need. Such assistance is considered to be unearned income even if provided in the form of a vendor payment (provided to a third party on behalf of the household), unless the vendor payment is specifically exempt from consideration as countable income under the provisions of Section 11.6 Income Exclusions. Assistance payments from programs which require, as a condition of eligibility, the actual performance of work without compensation other than the assistance payments themselves, shall be considered unearned income.**	

(E) Cash contributions (includes income from non-household members and non-BG members		***Exception: Cash contributions from a non-BG member/ person not in BG due to sanction disqualification. Exclude due to disqualified individual's income already counted in budget.***
(F) Child support payments	**Child support payments made directly to the household from the absent parent or through the court are counted as unearned income. Any child support arrearages ordered by the court to be paid on a regular basis (arrearage plus current month's obligation) is considered income.** **Child support paid through the Child Support Enforcement Division (CSED) is budgeted by means of an automated interface between CSED and CHIP systems.**	***Exception: Arrearages ordered by the court to be paid in a lump sum are treated as a resource.*** ***Child support payments received by TANF recipients which must be transferred to the agency administering title IV-D of the Social Security Act, as amended, to maintain TANF eligibility is budgeted retrospectively by the CSED/CHIP interface.***
(G) ~~Deferred payment loans for education~~		**This is no longer considered income – Effective April 1, 2012**
(H) Direct money payments	**Direct money payments from any source which can be construed to be a gain or benefit**	
(I) Disability benefits		
(J) Dividends~~, interest income and royalties~~	**Up to $400 per BG annually is excluded. Income above $400 must be averaged over the period the payments cover and anticipated over the certification period.**	~~***NOTE: For interest income of $400 or less per year, the household's statement may be accepted as verification***~~.
(K) Dividends from excludable resources	**Dividends which are, or could be, received by a household from trust funds considered to be excludable resources under Section 11.6 Income Exclusions. Dividends which the household has the option of either receiving as income or reinvesting in the trust are to be considered as income in the month they become available to the household unless otherwise exempt under the provisions of Section 11.6 Income Exclusions.**	***NOTE: All resources are excluded for categorically eligible household.***
(L) Educational assistance not excluded by SC Medicaid policy.	**Educational benefits earmarked for shelter are countable unearned income. See Section 11.7 Educational Assistance**	
(M) Family Independence (FI) (TANF) payments	**Count TANF (FI) supplemental payments for current and subsequent months.**	***Exception: Exclude TANF (FI) retroactive payments. Exclude FI payments of less than $10 per month. This is automatically done by the CHIP system.***
(N) Foster care payments (including accelerated board payments)	**Foster care payments for children or adults who are considered members of the household**	***Exception: Exclude if the foster child is not in the budget. Exclude any one-time allowance available to a foster home at***

		initial placement. Exclude quarterly clothing allowance for children who are in foster care and residing with a licensed/ approved provider.
(O) Garnishments from unearned income		
(P) Government sponsored programs payments	**Payments from Government-sponsored programs**	
(Q) Governmental rent, housing subsidies		
(S) Income maintenance insurance (including disability insurance)		***Exception: Exclude payments or allowances including:*** • ***Federal energy assistance except that provided under Title IV-A of the Social Security Act including utility reimbursements made by HUD and the Rural Housing Service.*** • ***A one-time payment or allowance applied for on an as-needed basis and made under a federal or state law for the costs of weatherization or emergency repair or replacement of heating or cooling devices. A down payment followed by a final payment upon completion of the work will be considered a one-time payment.*** • ***Energy assistance payments provided through the Department of Health and Human Services' Low-Income Energy Assistance Program and the Community Services Administration's Energy Crisis Assistance and the Crisis Intervention Program.*** ***Exclude HUD payments that are paid for utilities and HUD payments for housing that are paid solely to the landlord or mortgagee.***

		HUD payments supplemented with TANF funds are excluded.
(T) Indian payments for tribes	**Exclude up to $2,000 per year of income received by individual Indians that is derived from interests in trust.**	
(U) Interest income~~, dividends and royalties~~	**Up to $400 per BG annually is excluded. Income above $400 must be averaged over the period the payments cover and anticipated over the certification period.**	***NOTE: For interest income of $400 or less per year, the household's statement may be accepted as verification.***
(V) Jury Duty		
(W) Kinship Care		***NOTE: South Carolina does not operate a kinship care program. However, other states may make this form of reimbursement to a SC benefit group for a next-of-kin foster care placement.***
(X) Military allotments		***NOTE: A member of the military not in the household may have his or her earned income deposited into a jointly owned bank account with a household member. This income must be counted as unearned income for the household.***
(Y) Monies withdrawn from excludable resources	**Monies which are withdrawn from trust funds considered to be excludable resources under Section 11.6 Income Exclusions. Such trust withdrawals will be considered income in the month received, unless otherwise exempt under the provisions of Section 11.6 Income Exclusions.**	
(Z) Pensions		
(AA) Protective Payee Payments	**Count if money is received for a BG member.**	***Exception: Exclude if diverted to non-household member.***
(BB) Recoupment from means tested programs	**For FI, count recoupment due to intentional program violation (IPV), fraud, or client error.** **For SSI, count recoupment due to IPV or fraud.**	***Exception: For SSI, exclude recoupment due to client error. Exclude recoupment due to agency error from both FI and SSI programs.***
(CC) Recoupment/repayment from non-means tested source	**Excluded. Count the gross minus the recoupment/repayment amount.**	
(DD) Reimbursements	**Exclude reimbursements for past and future expenses to the extent they do not exceed actual expenses, and do not represent a gain or benefit to the household.**	***Note: Reimbursements will not be considered to exceed actual expenses unless the provider or household indicates the amount is excessive.***

		Reimbursements or flat allowances for job or training related expenses such as travel, per diem or uniforms are not considered a gain/benefit to the household.
(EE) Refugee cash assistance		
(FF) Rental income	**Gross income minus the cost of doing business derived from rental property in which a household member is not actively engaged in the management of the property at least 20 hours a week**	***Note: use the actual cost of doing business. The 40% cost of doing business applies to earned income only.***
(GG) Representative payee funds received for care and maintenance of non-HH member	**Count portion retained by representative payee for his/her benefit.**	
(HH) Retirement income		
(II) Royalties~~, dividends and interest income~~	**Up to $400 per BG annually is excluded. Income above $400 must be averaged over the period the payments cover and anticipated over the certification period.**	~~***NOTE: For interest income of $400 or less per year, the household's statement may be accepted as verification***~~**.**
(JJ) Scholarships		***Exception: other than educational assistance with a work requirement, in excess of amounts excluded under Section 11.7 Educational Assistance.***
(KK) Severance pay	**If payments are made on a regular basis, count as unearned income.**	***Exception: If payments are made in a lump sum, treat as a resource***
(LL) Shared living arrangements	**Proration of shelter costs for households living in the same residence does not necessarily imply an unearned income contribution if these payments are designated as each household's share of expenses. The Agency must verify that a shared living arrangement exists, rather than a landlord/tenant relationship.**	
(MM) Sick pay benefits paid by employer	**Count as unearned income if the employee will not return to work.**	***Exception: Count as earned income if the employee will return to work.***
(NN) Sick pay benefits from source other than employer, such as an insurance company		
(OO) Social Security benefits (SSA)	**The certification worker may use BDX field "Total Net Amount". See 11.5 Unearned Income (CC) Recoupment from non-means tested programs** **The IRS can intercept SSA benefits to collect claims paid for unpaid federal tax bills under the Federal Payment Levy Program. These garnished amounts are included.**	***Exception: For cases where the Social Security is paid to a representative payee, count the amount made available to or used on behalf of the household as unearned income. Count any amount retained by the representative payee for his/her***

		own use as income to the representative payee.
(PP) Supplemental Security Income (SSI) benefits	**The certification worker may use SDX field "SSI MO AST AMT" field unless there is a recoupment due to IPV or fraud. See 11.5 Unearned Income (BB) Recoupment from means tested programs** **Exception: When determining SCCAP eligibility the certification worker should use the SDX field "GRO" in addition to any other unearned income in a current pay status and in-kind income). See Section 19.2.**	***Exception: Exclude recoupment for overpayments due to agency and client error.*** ***Exception: For cases where the SSI is paid to a representative payee, count the amount made available to or used on behalf of the household as unearned income. Count any amount retained by the representative payee for his/her own use as income to the representative payee.***
(QQ) Strike benefits		
(RR) Third party payments/vendor payments	**Moneys legally obligated and otherwise payable to the household which are diverted by the provider of the payment to a third party for a household expense shall be counted as income. Exclude all but the following:** • **Monies that are legally obligated and otherwise payable to the BG, but are diverted to a third party** • **All or part of an FI benefit which is diverted to a third party or to a protective payee for purposes such as, but not limited to, managing a BG's expenses. In order for the income to be counted in the BG's budget, the third party or protective payee must either give the money to the BG or use it for meeting the BG's needs.** • **Monies deducted or diverted from a court ordered support or alimony payment to a third party for a BG expense unless the court order specifies that deducted payments go directly to a third party educational loans on which payment is deferred or any other educational grants, scholarships, etc., that are provided to a third party on behalf of the BG for living expenses.**	***Exception: Income diverted to an ex-spouse under the Uniformed Services Former Spouse Protection Act is excluded from the budget of the military retiree.*** ***If the ex-spouse is a SNAP recipient, this would be counted as income to the ex-spouse.*** ***i.e. A military retiree receives $800 each month and, under the Uniformed Services Former Spouse Protection Act, $300 is obligated to the retiree's ex-spouse. If both had SNAP cases $500 should be budgeted in the retiree's case, and $300 should be budgeted in the ex-spouses case.***
(SS) Trade readjustment allowance	**Count the same as unemployment compensation benefits.**	

(TT) Training allowances		***Exception: Exclude if training allowance is considered a reimbursement.*** ***NOTE: Count as earned income if training allowance is connected with an hourly wage or salary***
(UU) Trust fund income	**Count any money withdrawn by the household from the trust fund as unearned income in the month received. Dividends which the household has the option of either receiving as income or reinvesting in the trust must be counted as income in the month they became available to the household.**	
(VV) Unemployment compensation	**Unemployment compensation including any amounts deducted to repay claims for intentional program violations.**	
(WW) USDA settlement to African-American Farmers - Pigford v. Glickman	**Count as lump sum payment.**	
(XX) Vendor payments	**Money payments that are not directly paid to a BG, but are paid to a third party for a household expense. Vendor payments are not included as income to the household.**	***NOTE: A deduction cannot be allowed for any expense paid in the form of a vendor payment with the exception of those vendor payments which are included as income.***
(YY) Veteran's benefits (VA) (includes amounts for aid and attendance)		
(ZZ) Veteran's benefits authorized under the Agent Orange Act of 1991		***Exception: Agent Orange payments by Aetna Life and Casualty***
(AAA) Veteran's educational benefits not excluded under SC Medicaid Policy	**Veterans educational benefits earmarked for shelter are countable unearned income. See Section 11.7 Educational Assistance**	
(BBB) Victim's compensation	**If regular payments, count as unearned income.**	***Exception: If lump sum, consider as resource.***
(CCC) Vocational rehabilitation subsistence allowance from Veteran's Affairs		***Exception: Exclude amounts used for educational expenses such as tuition, mandatory fees, transportation, miscellaneous/ personal expenses, origination fees and insurance payments on student loans, and dependent care. In addition, any of this allowance considered as a***

		reimbursement may be excluded.
~~(DDD) Withdrawals (regular) from resources for categorically eligible HHs~~		**This is no longer considered income – Effective May 1, 2013**
(EEE) Worker's compensation benefits		

11.6 INCOME EXCLUSIONS

Only the following will be **excluded** from household income and no other income will be excluded:

Excluded Income	Description	*NOTE/Exception:*
(A) Educational assistance, including grants, scholarships, fellowships, work study, educational loans on which payment is deferred	**See Section 11.7 Education Assistance**	
(B) Educational assistance vendor payments	**Educational assistance provided to a third party on behalf of the household for living expenses shall be treated the same as educational assistance payable directly to the household.**	
(C) Federal law income exclusions	**See Section 11.8 Federal Law Income Exclusions**	
(D) Housing and Urban Development (HUD) vendor payments	**Rent or mortgage payments made to landlords or mortgagees by HUD.**	
(E) Infrequent or irregular income	**Any income in the certification period which is received too infrequently or irregularly to be reasonably anticipated, but not in excess of $30 in a quarter.**	
(F) In-kind benefits	**In-kind benefits are those for which no monetary payment is made on behalf of the household or any gain or benefit which is not in the form of money payable directly to the household.**	
(G) Loans	**All loans, including loans from private individuals, as well as commercial institutions (other than educational loans on which repayment is deferred) are excluded.**	***Note: To be excluded as a loan, there must be some expectation that the money will be paid back (i.e. some type of repayment schedule/ agreement).***
(H) Lump Sums	**Money received in the form of a non-recurring lump-sum payment, including but not limited to income tax refunds, rebates, or credits; retroactive lump sum Social Security, SSI,**	

	Public Assistance, Railroad retirement benefits, or other payments; lump sum insurance settlements; or refunds of security deposits on rental property or utilities. **These payments are treated as a resource in the month received.**	
(I) Public assistance vendor payments	**PA vendor payments are counted as income unless they are made for:** **(i) Medical assistance;** **(ii) Child care assistance;** **(iii) Energy assistance as defined in paragraph (c)(11) of this section;** **(iv) Emergency assistance (including, but not limited to housing and transportation payments) for migrant or seasonal farm worker households while they are in the job stream;** **(v) Housing assistance payments made through a State or local housing authority;** **(vi) Emergency and special assistance. To be considered emergency or special assistance and excluded under this provision, the assistance must be provided over and above the normal PA grant or payment, or cannot normally be provided as part of such grant or payment.**	
(J) Vendor payments	**A vendor payment is a money payment made on behalf of a household by a person or organization outside of the household directly to either the household's creditors or to a person or organization providing a service to the household.**	
(K) Veterans' educational benefits		
(L) Uniformed Services Former Spouse Protection Act	**Income diverted to an ex-spouse under the Uniform Services Former Spouse Protection Act is excluded from the budget of the military retiree**	***Note: Income received by the ex-spouse of a military retiree would be counted as income to the ex-spouse***

11.7 EDUCATIONAL ASSISTANCE

Educational assistance excluded under South Carolina Medicaid rules is also excluded for SNAP. Educational assistance excluded under these rules includes the following:

Student loans, scholarships, awards, fellowships, and grants used for educational purposes, and **not for living expenses**, are excluded from income. Student loans, scholarships, awards, fellowships, and grants **used for living expenses** are counted as income. The cost of tuition,

books, equipment, fees, tutorial services, or any other necessary education expenses are considered an educational expense.

11.8 FEDERAL LAW INCOME EXCLUSIONS

The payments/ benefits received from the following sources are excluded as income by federal law:

(A) Agent Orange payments by Aetna Life and Casualty
(B) Allowances, earnings, or payments to individuals participating in WIA programs except earnings paid to participants in on-the-job training programs.
(C) Child Care Development Block Grant (this includes ABC Child Care Voucher System)

NOTE: Payments from this funding to an individual providing the child care are counted as earned income.

(D) Crime victim compensation received under the Crime Act of 1984
(E) Disaster Relief and Emergency Assistance Amendments of 1988
(F) Disaster relief employment income from National Emergency Grants that are part of the Workforce Investment Act (WIA). Verification may be obtained through WIA at Employment Security Commission (ESC)
(G) Family Investment Center Program services through the Department of Housing and Urban Development. These services include, but are not limited to:

- Child care
- Employment training and counseling
- Literacy training
- Computer skills training

(H) Filipino Veterans Equity Compensation Fund paid to veterans and the spouses of veterans who served in the military of the commonwealth of the Philippines during World War II.

(I) Income funded under Older American Act (formerly Green Thumb), including but not limited to AARP, National Council on Aging, And Senior Community Service Employment programs.

(J) Indian payments as follows:

- Income derived from certain sub-marginal land of the United States which is held in trust for certain Indian tribes (Pub. L. 94-114, section 6)
- Income derived from the disposition of funds to the Grand River Band of Ottawa Indians (Pub. L. 94-540)
- Payments by the Indians Claims Commission to the Confederated Tribes and Bands of the Yakima Indian Nation or the Apache Tribe of the Mescalero
- Payments to the Passamaquoddy Tribe and the Penobscot Nation or any of their members received pursuant to the Maine Indian Settlement Act of 1980 (Pub. L. 96-420, section 5)
- Payments of relocation assistance to members of the Navajo and Hopi Tribes (Pub. L. 93-531)
- Payments made under the Alaska Native Claims Settlement Act (Pub. L. 92-302, section 21a)

(K) Medicare approved Prescription Drug Card discount and/or credit

(L) National Flood Insurance Program (NFIP) payments under the National Flood Insurance Act of 1968, as amended by Pub. L. 109-64, enacted on September 20, 2005.

(M) Nazi Persecution: payments made to victims of Nazi persecution

(N) Old Age Assistance Claims Settlement Act payments of $2,000 or less

(O) PASS: amounts necessary for fulfillment of a plan for achieving self-support (PASS) under Title XVI of the Social Security Act

(P) Radiation Exposure Compensation Act

(Q) Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970

(R) Veterans Administration (VA) benefits paid to the children of Vietnam veterans born with spinal bifida and certain other birth defects

(S) Weekly $25 supplemental weekly Unemployment Compensation payment authorized by the American Recovery and Reinvestment Act of 2OO9 (ARRA).

(T) Earned income Tax credit payments received either as a lump sum or payments under section 3507 of the Internal Revenue Code of 1986 (relating to advance payment of earned income tax credits received as part of the paycheck or as a reduction in taxes that otherwise would have been paid at the end of the year).

Chapter 12 Income Deductions

12.1 INCOME DEDUCTIONS/GENERAL

After determining the gross income of each household member, the following deductions, provided the household is eligible for them, may be given:

(A) A federally mandated standard deduction (See **Section 12.2 Standard Deduction**);
(B) 20% earned income deduction (See **Section 12.3 Earned income Deduction)**;
(C) $504 Maximum excess shelter (See **Section 12.4 Shelter Deduction**);

NOTE: Households where all members are homeless may be given a homeless standard shelter deduction of $143, if they incur shelter expenses.

(D) $291 Mandatory utility allowance (MUA). See **Section 12.5 Utility Allowances (2) Mandatory Utility Allowance (MUA)**;
(E) $211 Basic utility allowance (BUA). See **Section 12.5 Utility Allowances (3) Basic Utility Allowance (BUA)**;
(F) $27 Telephone allowance
(G) Monthly dependent care expenses. See **Section 12.6 Dependent Care Deduction**;
(H) Legally obligated child support deduction. See **Section 12.7 Child Support Deduction**; and
(I) Medical deduction in excess of $35. **See Section 12.8 Medical Deduction.**

Required verification must be provided before a deduction can be given.

12.2 STANDARD DEDUCTION

According the federal regulations, each household is allowed a standard deduction that varies according to household size. Total income is reduced by the amount of the standard deduction. The standard deduction by household size is as follows:

(A) $155 for household size of 1-3
(B) $168 for household size of 4
(C) $197 for household size of 5
(D) $226 for household size of 6 or more

12.3 EARNED INCOME DEDUCTION

Twenty percent of gross earned income as defined in **Section 11.3 Earned Income** is disregarded for each employed household member. This disregard is intended to cover payroll deductions such as FICA, state or federal income tax, pensions, union dues, etc. Earnings excluded in **Section 11.6 Income Exclusions** will not be included in gross earned income for purposes of computing the earned income deduction.

The earned income deduction is not applied when:

- The Recipient Claims Worker calculates and intentional program violation claim (see **Chapter 23 Claims Against Households**).
- When determining an overpayment due to the household failing to report earned income in a timely manner.

For self-employment income (see **Section 11.4 Self-employment Income**) the cost of doing business should be deducted from the gross income before the 20% deduction is applied. For self-employment income where there is a farm loss:

(A) Compute the total gross farm self-employment
(B) Subtract the allowable costs of doing business
(C) Compute the total gross non-farm self-employment
(D) Subtract the allowable costs of doing business and any farm losses

Apply the earned income deduction to any net profit. If there is no net profit, there is no earned income deduction. If the household has a farm loss to be offset against earned income that is not from self-employment, the earned income deduction is computed based on this remaining earned income.

12.4 SHELTER DEDUCTION

(1) Excess shelter deduction

Excess shelter deduction is the monthly shelter expenses in excess of 50 percent of the household's income after all other deductions have been allowed (See **Section 12.1Maximum Excess Shelter**). Households containing a member (or members) who are elderly or disabled (see **Section 14.10 Definition of Elderly or Disabled**) are entitled to an unlimited excess shelter deduction. All other households are entitled to a limited excess shelter deduction not to exceed the amounts noted in **Section 12.1 Maximum Excess Shelter**.

NOTE: An ineligible noncitizen or SSN disqualified person who is elderly or disabled does not entitle the household to an unlimited shelter deduction.

The deduction will be allowed only in the month the expense is billed or otherwise becomes due, regardless of when the household intends to pay the expense. Amounts carried forward from past billing periods are not deductible, even if included with the most recent billing and actually paid by the household. When the household occupies a residence that has a monthly rent structure, the monthly amount of rent should be taken into consideration each month when the shelter deduction is determined without regard to when it is actually paid.

(2) Averaging shelter expenses

Households may elect to have an expense that is billed less often than monthly averaged over the interval between scheduled billings, or if there is no scheduled interval, over the period it is intended to cover. A prorated share of the expense would be allowed in each month over which the payment was averaged, even if all of the months are not within the same certification period.

(3) Allowed shelter expense

Only the following expenses are allowable shelter expenses:

(A) Continuing charges for the shelter occupied by the household, including rent, mortgage, condo and association fees, or other continuing charges leading to the ownership of the shelter such as loan repayments for the purchase of a mobile home, including interest on such payments.
(B) Property taxes, State and local assessments.
(C) Insurance premiums on the structure itself, but not separate costs for insuring furniture or personal belongings.
(D) The cost of fuel for heating; cooling (*i.e.*, the operation of air conditioning systems or room air conditioners); electricity or fuel used for purposes other than heating or cooling; water; sewerage; well installation and maintenance; septic tank system installation and maintenance; garbage and trash collection; service fees for one telephone.

NOTE: One-time deposits cannot be included.

(E) The shelter costs for a home if temporarily not occupied by the household because of employment or training away from home, illness, or abandonment caused by a natural disaster or casualty loss.

For costs of a home vacated by the household to be included in the household's shelter costs, the household must intend to return to the home; the current occupants of the home, if any, must not be claiming the shelter costs for SNAP purposes; and the home must not be leased or rented during the absence of the household.

NOTE: The household can only choose actual utility costs, not the MUA or BUA for an unoccupied home.

(F) Charges for the repair of the home which was substantially damaged or destroyed due to a natural disaster such as a fire or flood. Shelter costs will not include charges for repair of the home that have been or will be reimbursed by private or public relief agencies, insurance companies, or from any other source.

NOTE: A shelter deduction cannot be allowed for any expense paid in the form of a vendor payment.

(4) Disallowed shelter costs

The following are not allowed as shelter costs:

(A) Mortgage payments on which the Farmer's Home Administration (FmHA) has placed a moratorium.

NOTE: After the one or two year moratorium has ended, allow the recalculated payment.

(B) Fees charged for one time deposits on utilities or penalty fees for late payments.
(C) Weatherization expenses.
(D) Regime fees that do not lead to ownership.
(E) Insurance premiums for separate identifiable costs for belongings.
(F) Repairs or replacement of appliances, water well, etc., due to wear or mechanical problems.
(G) Costs relating to housing not actually occupied by the household unless temporarily unoccupied according to **Section 12.4 Shelter Deduction (3) Allowed shelter expenses (E).**
(H) Down payments, closing costs, etc., incidental to purchase of home.
(I) Site preparation to locate mobile home.
(J) Any portion of a HUD rental subsidy designated as a recoupment.
(K) Any portion of a mortgage payment which is intended to cover any past due amounts.
(L) Any expense paid in the form of a vendor payment

12.5 UTILITY ALLOWANCES

(1) Utility Allowances/ General

At application, a household must choose:

(A) Actual verified utility cost, if not entitled to the MUA or BUA
(B) Mandatory utility allowance (MUA) if entitled
(C) Basic utility allowance (BUA) if entitled, or
(D) No utility deduction.

A household may switch its selection at recertification or when the household moves. A household with a 24 month certification period may switch its selection at the 12 month interim contact.

Utility costs include the costs for:

- Heating/cooking fuel
- Water/sewage
- Electricity
- Garbage/trash collection
- State standard for telephone use. Households participating in Bell South's Lifeline program are eligible for the state telephone standard.
- Fees charged for installation of utilities.

If either actual utility costs, the BUA or the MUA is chosen for a deduction but required verification is not submitted, the deduction cannot be given.

(2) Mandatory Utility Allowance (MUA)

To be entitled to the MUA, the following criteria must be met:

(A) During the year, the household must incur and be billed for, or expect to incur during the next heating or cooling season

- Heating cost
- Cooling cost (air conditioning) **OR**

(B) The household must have received a Low-Income Home Energy Assistance Payment (LIHEAP) greater than $20 within the past 12 months, regardless of whether or not a heating/cooling cost is incurred. Eligibility for LIHEAP implies out-of-pocket expense.

NOTE:

- ***LIHEAP payments in South Carolina are greater than $20. Therefore, it will only be necessary to establish that the client received LIHEAP within the previous 12 months when establishing eligibility for MUA based on receipt of LIHEAP.***

- ***If the household entitled to the MUA because of receipt of a LIHEAP payment moves, entitlement to the MUA must be reevaluated.***

OR

(C) The household must receive energy assistance under state law.

Households that receive a HUD utility payment or an FMHA utility payment are entitled to a utility deduction only if they incur heating or cooling costs that exceed the amount of the utility payment. In this case, the household must receive the MUA.

The MUA may be given to:

(A) Households in private rental housing who are billed by their landlords on the basis of individual usage or who are charged a flat rate separately from their rent
(B) Households who receive energy assistance (other than LIHEAP) that is excluded as income if the amount of the expense exceeds the amount of the energy assistance
(C) Households who receive energy assistance that is counted as income.
(D) Residents of public housing units which have central utility meters and charge the households only for excess heating or cooling costs.

The MUA must not be given to the following unless the household receives LIHEAP:

(A) Households with no utility expenses
(B) Households billed for some utilities but not incurring a heating/cooling cost
(C) Households whose primary heating/cooling cost is included in the rent payment. The household must incur expenses for its primary heating/ cooling costs separately and apart from its rent to be entitled to the MUA. Utility costs for the operation of a space heater, electric blanket, heat lamp or a cooking stove and the like when used as a supplemental heating source do not qualify a household for the MUA.

(3) Basic Utility Allowance (BUA)

Households billed for some utilities but not incurring a heating/ cooling cost may receive the BUA. To be entitled to the BUA, the household must incur and be billed for two of the following:

- Cooking fuel
- Water/sewage

- Electricity
- Garbage/trash collection
- Telephone

The BUA must not be given to the following households:

(A) Households with no utility expenses
(B) Households whose utility costs are included in the rent payment

(4) Actual Utility Costs

Actual utility costs are only allowed for households not entitled to the MUA or BUA. If eligible for actual costs, deductions are allowed for:

- Heating /cooking fuel
- Water/sewage
- Electricity
- Garbage/trash collection
- Fees charged for utility installation
- State standard for telephone.

The Agency must reasonably anticipate that the charges for claimed utilities will continue throughout the certification period.

(5) Multiple households/ multiple residences

Multiple households living in the same residence must agree on the type of utility allowance, either MUA, BUA or actual. Entitlement to the MUA is based on either heating or cooling costs, receipt of LIEAP, or energy assistance under state law.

Entitlement to the BUA is based on non-heating/non-cooling costs. If a household lives with and shares heating or cooling expenses with another individual, another household, or both, the Agency will **not** prorate the MUA or BUA provided to a household that lives and shares heating or cooling expenses with others. The Agency will **not** prorate the MUA or BUA if all the individuals who share utility expenses but are not in the SNAP household are excluded from the household only because they are ineligible.

12.6 DEPENDENT CARE DEDUCTION

A dependent care deduction is allowed on an as billed or as due basis for payments for the actual costs for the care of children or other dependents when necessary for a household member to accept or continue employment, or attend training or pursue education which is expected to lead to employment. The dependent for whom costs are billed should be in the SNAP household or

should reside in the home with the SNAP household member. To be eligible to receive a dependent care deduction, the household must pay an individual outside the SNAP household for this service.

The following chart describes treatment of dependent care expenses associated with educational assistance:

Educational Assistance	Treatment	Deduction
(A) Carl D. Perkins educational assistance	**Exclude the amount earmarked or amount verified, whichever is greater. Total exclusions for verified amount cannot be greater than total grant amount.**	**If household verifies dependent care expense which, with total exclusions, is more than total grant, allow a deduction for the excess on CHIP screen EXNS**
(B) Other educational assistance not totally excluded	**(i) If earmarked under miscellaneous personal expenses (MPE), exclude earmarked amount or amount verified, whichever is greater.** **(ii) If earmarked other than under MPE, exclude as a reimbursement.** **(iii) If there is no earmarking for dependent care (under MPE or otherwise), do not exclude from educational assistance.**	**(i) If household verifies dependent care expense which, with total exclusions, is more than total grant, allow a deduction for the excess on CHIP screen EXNS** **(ii) Allow dependent care deduction on CHIP screen EXNS for amounts used over and above the earmarked amount.** **(iii) Allow dependent care deduction on CHIP screen EXNS.**

If dependent care expenses are earmarked in more than one source of educational assistance, exclude the earmarked amount from each source.

The following chart describes the treatment of child care payments and dependent care expenses not associated with educational assistance:

Type	Treatment
(C) Payments made under the Child Care and Development Block Grant (CCDBG) - This includes ABC Child Care Voucher System	**Exclude income to the household containing the children, as this is a vendor payment. No deduction allowed. Count payments to the individual providing the child care as earned income. If an individual pays out-of-pocket costs, a deduction may be allowed for this amount**
(D) Attendant care cost	**If qualifies under both the dependent care and medical deduction, treat cost as medical expense.**
(E) Reimbursed dependent care expenses	**If reimbursement exceeds charge, count excess as income. No deduction allowed. If charge exceeds reimbursement, allow deduction for excess amount charged.**

(F) Vendor paid dependent care expenses	**Exclude as income. No deduction allowed.**

12.7 CHILD SUPPORT DEDUCTION

A deduction is allowed for household members who make legally obligated child support payments to or for an individual living outside of the household. This deduction will include legally obligated payments made to a third party on behalf of the non-household member (vendor payments). A deduction is allowed when a legally obligated child support payment is made to an individual or agency outside the household even if the child for whom the support is paid is a household member. A deduction is also allowed for amounts paid toward court ordered arrearages. Alimony payments and amounts paid toward court costs will not be included in this deduction.

The child support deduction must reflect the amount the household pays or expects to pay during the certification period, not the obligated amount. This amount must not exceed the obligated amount.

The Agency must verify:

- The legal obligation to pay
- The amount of the obligation
- The actual amount paid.

On initial applications and face-to-face/ telephone recertifications that report this expense, the Agency will verify the previous four weeks of payments. The average of these four weeks, taking into account any anticipated changes will be converted to a monthly amount and used as the household's support deduction. A deduction may also be allowed for amounts paid toward arrearages.

At recertification, changes in the legal obligation including the amount of the obligation and the amount of child support the household pays must be verified. If the household fails or refuses to submit this required verification, eligibility and allotment will be determined without the child support deduction.

The Agency must estimate anticipated payments and use this estimate as the BG's support deduction on those cases with no child support payment record or less than a four week record. Payments towards arrearages may be used in this estimate.

The Agency will use the previous four week record of payments to develop an average to convert to a monthly amount and use as the household's support deduction. The Agency must make adjustments for any anticipated changes.

12.8 ~~EXCESS~~ MEDICAL DEDUCTION

~~Excess medical deduction is that~~ A medical deduction is the portion of out-of-pocket medical expenses in excess of $35 per month per household, excluding special diets, incurred by ~~any~~ at least one eligible household member who is elderly (age 60 or older) or disabled as defined in **Section 5.1 Verification Prior to Certification (5)Disability**. The individual must meet the definition of elderly or disabled at the time the expense was originally incurred/ billed in order to receive a medical deduction for the out-of-pocket expense.

Effective November 2015, when a household's monthly medical expenses total more than $35.00 but do not exceed more than $210.00, the Standard Medical Deduction of $175.00 ($210.00-$35.00) may be allowed. To be eligible for the Standard Medical Deduction, a household must incur and verify greater than $35.00 a month in qualifying medical expenses.

Households that report incurring medical expenses greater than $210.00 per month will be given the option to verify all of their actual monthly medical expenses in order to receive the Excess Medical Deduction or monthly medical expenses that total more than $35.00 but do not exceed $210.00 in order to receive the Standard Medical Deduction.

An out-of-pocket medical expense can be paid by another household member as long as an eligible member incurred the expense. The eligible member need not be a current household member, but must have been a member of the household at the time the expense was incurred.

Credit card charges and loans for out-of-pocket medical expenses are allowed as deductions when the statement is received and the amount of reimbursement is known. The household must be able to verify the portion of the credit card statement or the loan that is for the medical deduction they are claiming.

NOTE: Spouses or other persons receiving benefits as a dependent of the SSI or disability and blindness recipient are not eligible to receive this deduction but persons receiving emergency SSI benefits based on presumptive eligibility are eligible for this deduction.

(1) Non-recurring medical expenses

These medical expenses occur on a one-time basis.

- For households subject to six month recertification, allowable non-recurring medical expenses may be given, at the individual's option, as a one-time deduction, or the expense can be prorated over a 12 month period.
- For households in which all adult members are elderly or disabled with no earned income, allowable non-recurring medical expenses may be given, at the individual's option, as a one-time deduction, or the expense can be prorated over a 12 month period. At such time that the household is required to complete an interim contact form, a new certification period begins.

(2) Recurring Medical Expenses

These medical expenses continue to occur over a specific period of time. The deduction can be allowed in the month the expense is billed or otherwise becomes due. Past due medical expenses may be taken into consideration if reported at the appropriate certification/ recertification as required. If the expense is billed less often than monthly, the household may elect to have the expense averaged over the certification period. Medical expense deductions would be based upon current verified medical expenses and any anticipated changes that can reasonably be expected to occur during the certification period. If the household reports a medical expense at certification but cannot verify the expense, the Agency must not give the deduction until the expense and reimbursement are verified.

See 5.1 Verification Prior to Certification (9) Medical Expenses for additional information regarding verification of medical at initial certification and 5.7 Verification Subsequent to Initial Certification for additional information regarding verification and treatment of medical at recertification when changes are reported.

Allowable medical costs are:

Allowable Medical Expenses	Examples
(A) Cost of medical and dental services, including dentures and hearing aids	**Includes psychotherapy and rehabilitation provide by a licensed practitioner authorized by state law or other qualified health professional including chiropractor and acupuncturist.**
(B) Cost of hospitalization or outpatient treatment, nursing care and nursing home care provided by a facility recognized by the State	**Includes payments by the household for an individual who was a household member immediately before entering a hospital or nursing home.**
(C) Cost of drugs and supplies prescribed by a licensed practitioner	**Includes prescription drugs, over the counter medicine when approved by a licensed practitioner, approved medical supplies, prosthetics or durable equipment such as wheel chairs, walkers and hospital beds (including rental).** **Note: The SNAP medical deduction may not be given for the cost of any substance considered illegal under federal law (i.e. medicinal marijuana), even if this cost was incurred while a resident of a state which had provisions to prescribe them.**
(D) Premiums for health, hospitalization, dental insurance, Medicare under Title XVIII of the Social Security Act	**Premiums for health/accident policies paying lump sum benefits for death/dismemberment are not deductible. The costs of health and accident policies such as those payable in lump sum settlements for death or dismemberment or income maintenance policies such as those that continue mortgage or loan payments while the beneficiary is disabled are not deductible. Premiums for income maintenance insurance are not deductible. Exclude the premium portion attributable to nondeductible coverage or to a person not entitled to medical deduction.**
(E) Cost of eyeglasses or contact lenses	**Prescribed by a physician skilled in eye diseases or an optometrist.**

(F) Cost of securing and maintaining any service animal (i.e. seeing eye dog, housekeeping monkey, etc.) trained to serve the needs of a disabled individual when prescribed by a licensed practitioner authorized by state law.	**Includes food, veterinarian bills and other related expenses.** **Note: The Individual must verify the need for the service animal as well as the expense**
(G) Reasonable cost of transportation and lodging necessary to secure prescribed medical treatment or services	**Mileage cost established for state employees is allowed when individual uses his/her own personal vehicle. Actual cost must be used for all other types of transportation.**
(H) Cost of maintaining an attendant, homemaker, home health aide, child care service or housekeeper necessary due to age infirmity, or illness	**If the household furnishes the majority of attendant's meals, deduct amount equal to the maximum one person coupon allotment according to the thrifty food plan (TFP) in effect at certification. If attendant care costs qualify as both a medical and a dependent care deduction, treat as a medical expense. Attendant cost must be updated at recertification.**
(I) Spend down or cost sharing expenses incurred by Medicaid recipients	**Mandatory incurred medical expenses required prior to eligibility for certain Medicaid programs.**
(J) Payments by residents of drug/alcohol treatment centers	**Payments must be for separate and identifiable medical costs at the center.**
(K) Cost of telephonic equipment used by a handicapped person	**Includes monthly telephonic fees for amplifiers and warning signals and cost of typewriter equipment for the deaf which can be plugged into the telephone system.**
(L) Monthly Premium for individuals enrolled in the Medicare Drug Program Part D	**Most FS recipients will pay no monthly premium.**

Expenses incurred because of special diets are not an allowable medical deduction.

Chapter 13

Chapter 13 Determining Household Eligibility and Benefit Levels

13.1 PROSPECTIVE ELIGIBILITY

Prospective eligibility is the use of anticipated and/or actual income and circumstances to determine eligibility for the benefit month. If prospective ineligibility is determined, the case must be closed at the earliest possible effective date.

All SNAP cases are budgeted prospectively. The Agency will use the following budgeting procedures to determine ongoing prospective income:

(A) To determine representative income, verify all income received in four (4) current consecutive weeks. Current means received in the budget month or the month preceding the budget month. The budget month is the month the application, recertification or report form is received.
(B) Determine the number of times this income was received in those four weeks. Use income receipt date (not pay period ending date). To determine countable income, the Agency must use four current consecutive weeks of income unless one or more of those pay dates is determined to be not representative.

Representative income is that which is within the range of what would be considered typical or usual for that particular job. Income that is significantly higher or lower due to circumstances that are not typical or usual would not be considered representative. Such a break or difference in income might be due to illness, a death, vacation, emergency or overtime, etc. The Agency must also determine if a week in which no pay is received in the four week period is representative, considering the nature of the job in making this determination. If the pay for one or more of the four consecutive weeks is not representative, disregard that week(s) income and document the reason it was not considered representative income.

Income may include base pay which is representative and bonus or vacation pay which is non-representative. In this situation, the Agency could separate the base pay from the bonus/vacation pay and consider the base pay as representative income.

(C) Add the weeks of representative pay.
(D) Divide the total income in Step (D) above by the number of representative pay dates to obtain the average income per pay dates.
(E) Multiply the average income per pay date obtained in Step (E) according to the frequency of receipt:

- Weekly average income/ x 4.33
- Biweekly~ average income/ x 2.16
- Semimonthly~ average income/ x 2
- Monthly income/(one month average) x 1
- If income is received on a daily or sporadic basis, add all income received during the four week period and divide by 4. Convert average income to a monthly figure by multiplying by 4.33. Weeks in which no income is received may be representative. If necessary, the Agency may obtain eight weeks of income. This should be done in situations where the daily or sporadic income fluctuates significantly. An example of this would be sporadic child support.

If necessary, the Agency may obtain two months or more of wages or other income to determine representative pay necessary to compute monthly income when a household's income fluctuates.

Households who receive income on a recurring monthly or semi-monthly basis shall not have their monthly income varied merely because of changes in mailing cycles or pay dates, or because weekends or holidays cause additional payments to be received in a month. For example, many government employees receive income on this schedule.

Income anticipated during the certification period shall be counted as income only in the month it is expected to be received, unless the income is averaged. For example, a household usually gets one child support payment per month. However, in one month they receive two payments, one for the previous month and one for the current month. The payment must be counted for the month that it was expected to be received (month payment is intended for).

13.2 DETERMINING HOUSEHOLD ELIGIBILITY

(1) Month of application

A SNAP household's eligibility will be determined for the month of application by considering the household's circumstances for the entire calendar month of application.

NOTE: Applicant households consisting of residents of a public institution who apply jointly for SSI and SNAP prior to release from the public institution will have their eligibility determined for the month in which the applicant household was released from the institution.

A household's benefit level for the initial months of certification will be based on the day of the month it applies for benefits. The household will receive prorated benefits from the date of application to the end of the month. If the computation results in an allotment of less than $10, then no issuance shall be made for the initial month.

Prorated Benefit can be determined by using the following formula:

$$\frac{[\text{\# of days in month} + 1 - \text{application date}] \times \text{full benefit}}{\text{\# of days in month}}$$

EXCEPTION: the applicant household consists of residents of a public institution. For households which apply for SSI prior to their release from a public institution, the benefit level for the initial month of certification will be based on the date of the month the household is released from the institution. The household will receive benefits from the date of the household's release from the institution to the end of the month.

As used in this section, the term "initial month" means the first month for which the household is certified for participation in the SNAP following any period during which the household was not certified for participation.

EXCEPTION: Migrant and seasonal farm worker households. In the case of migrant and seasonal farm worker households, the term "initial month" means the first month for which the household is certified for participation in the SNAP following any period of more than 1 month during which the household was not certified for participation.

(2) Recertification

Eligibility for recertification will be determined based on circumstances anticipated for the certification period starting the month following the expiration of the current certification period. The level of benefits for recertifications will be based on the same anticipated circumstances. If the household submits an application for recertification prior to the end of its certification period and is found eligible for the first month following the end of the certification period, then that month will not be an initial month and benefits will not be prorated.

If a household, other than a migrant or seasonal farm worker household, submits an application after the household's certification period has expired, that application will be considered an initial application and benefits for that month will be prorated. In addition, if the household submits an application for recertification prior to the end of its certification period but is found ineligible for the first month following the end of the certification period, then the first month of any subsequent participation will be considered an initial month.

If a household's failure to timely apply for recertification was due to an error of the Agency and therefore there was a break in participation, the Agency will follow the procedures in **Chapter 17 Recertification of SNAP Households**.

(3) Anticipated changes

Because of anticipated changes, a household may be eligible for the month of application, but ineligible in the subsequent month. The household will be entitled to benefits for the month of application even if the processing of its application results in the benefits being issued in the subsequent month.

Similarly, a household may be ineligible for the month of application, but eligible in the subsequent month due to anticipated changes in circumstances. Even though ineligible for the month of application, the household does not have to reapply in the subsequent month. The same application will be used for the determination of eligibility for subsequent months.

(4) Changes in allotment levels

As a result of anticipating changes, the household's allotment for the month of application may differ from its allotment in subsequent months

13.3 DETERMINING RESOURCES

Available resources for households that do not qualify for categorical eligibility defined in **Section 4.1 Temporary Assistance for Needy Families (TANF)/ Supplemental Security Income (SSI) Categorically Eligible Households** at the time the household is interviewed will be used to determine the household's eligibility.

13.4 DETERMINING INCOME

(1) Anticipating income

For the purpose of determining the household's eligibility and level of benefits, the Agency will take into account the income already received by the household during the certification period and any anticipated income the household and the Agency are reasonably certain will be received during the remainder of the certification period.

If the amount of income that will be received, or when it will be received, is uncertain, that portion of the household's income that is uncertain will not be counted by the Agency. For example, a household anticipating income from a new source, such as a new job or recently applied for public assistance may be uncertain as to the timing and amount of the initial payment.

These moneys will not be anticipated by the Agency unless there is reasonable certainty concerning the month in which the payment will be received and in what amount. If the exact

amount of the income is not known, that portion of it which can be anticipated with reasonable certainty shall be considered as income.

In cases where the receipt of income is reasonably certain but the monthly amount may fluctuate, the household may elect to income average.

Income received during the past 30 days will be used as an indicator of the income that is and will be available to the household during the certification period. However, the Agency will not use past income as an indicator of income anticipated for the certification period if changes in income have occurred or can be anticipated.

If income fluctuates to the extent that a 30-day period alone cannot provide an accurate indication of anticipated income, the Agency and the household may use a longer period of past time if it will provide a more accurate indication of anticipated fluctuations in future income. Similarly, if the household's income fluctuates seasonally, it may be appropriate to use the most recent season comparable to the certification period, rather than the last 30 days, as one indicator of anticipated income.

The Agency will exercise particular caution in using income from a past season as an indicator of income for the certification period. In many cases of seasonally fluctuating income, the income also fluctuates from one season in one year to the same season in the next year.

In no event will the Agency automatically attribute to the household the amounts of any past income. The Agency will not use past income as an indicator of anticipated income when changes in income have occurred or can be anticipated during the certification period.

(2) Income only in month received

Income anticipated during the certification period will be counted as income only in the month it is expected to be received, unless the income is averaged. Whenever a full month's income is anticipated but is received on a weekly or biweekly basis, the State agency shall convert the income to a monthly amount by multiplying by 4.33 and biweekly amounts by multiplying by 2.16, or use the exact monthly figure if it can be anticipated for each month of the certification period.

***NOTE: Nonrecurring lump-sum payments shall be counted as a resource starting in the month received and shall not be counted as income as defined in* Section 10.5 Lump Sum Payments as Resources.**

Wages held at the request of the employee will be considered income to the household in the month the wages would otherwise have been paid by the employer. However, wages held by the employer as a general practice, even if in violation of law, will not be counted as income to the household, unless the household anticipates that it will ask for and receive an advance, or that it will receive income from wages that were previously held by the employer as a general practice and that were, therefore, not previously counted as income by the Agency. Advances on wages

shall count as income in the month received only if reasonably anticipated as defined in **Section 13.4 Determining Income *(1) Anticipating income.***

Households receiving income on a recurring monthly or semimonthly basis will not have their monthly income varied merely because of changes in mailing cycles or pay dates or because weekends or holidays cause additional payments to be received in a month.

(3) Income averaging

To average income, the Agency will use the household's anticipation of monthly income to be received over the certification period. An average must be recalculated at recertification, in accordance with **Chapter 17 Recertification of SNAP Households**, and in response to changes in income, in accordance **Chapter 15 Change Reporting Requirements**.

Households which, by contract or self-employment, derive their annual income in a period of time shorter than 1 year will have that income averaged over a 12-month period provided the income from the contract is not received on an hourly or piecework basis. These households may include school employees, sharecroppers, farmers, and other self-employed households. However, these provisions do not apply to migrant or seasonal farm workers. The procedures for determining self-employed income are described in **Section 11.4 Self- employment Income.** Contract income which is not the household's annual income and is not paid on an hourly or piecework basis will be prorated over the period the income is intended to cover.

Earned and unearned educational income (See **Section 11.7 Educational Assistance**), after allowable exclusions, will be averaged over the period which it is intended to cover. Income will be counted either in the month it is received, or in the month the household anticipates receiving it or receiving the first installment payment, although it is still prorated over the period it is intended to cover.

13.5 DETERMINING DEDUCTIONS

Allowable deductions include only certain dependent care, shelter, child support and medical costs as described in **Chapter 12 Income Deductions**.

NOTE: Dependent Care Expenses will only be deductible if the service is provided by someone outside of the SNAP household and the SNAP household makes a money payment for the service. For example, a dependent care deduction will not be allowed if another SNAP household member provides the care, or compensation for the care is provided in the form of an in-kind benefit, such as food.

(1) Billed expenses

Except as provided in **Section 13.5 Determining Deductions (3) *Anticipating expenses*,** a deduction will be allowed only in the month the expense is billed or otherwise becomes due, regardless of when the household intends to pay the expense. For example, rent which is due each month shall be included in the household's shelter costs, even if the household has not yet paid the expense. Amounts carried forward from past billing periods are not deductible, even if included with the most recent billing and actually paid by the household. In any event, a particular expense may only be deducted once.

(2) Averaging expenses

Households may elect to have fluctuating expenses averaged. Households may also elect to have expenses which are billed less often than monthly averaged forward over the interval between scheduled billings, or, if there is no scheduled interval, averaged forward over the period the expense is intended to cover.

For example, if a household receives a single bill in February which covers a 3-month supply of fuel oil, the bill may be averaged over February, March, and April. The household may elect to have one-time only expenses averaged over the entire certification period in which they are billed.

(3) Anticipating expenses

The Agency will calculate a household's expenses based on the expenses the household expects to be billed for during the certification period. Anticipation of the expense will be based on the most recent month's bills, unless the household is reasonably certain a change will occur.

(A) When the household is not claiming the mandatory utility allowance (MUA) (See **Section 12.5 Utility Allowances (2) *Mandatory Utility Allowance (MUA)***), the Agency will anticipate changes during the certification period based on last year's bills from the same period updated by overall price increases; or, if only the most recent bill is available, utility cost increases or decreases over the months of the certification period may be based on utility company estimates for the type of dwelling and utilities used by the household. The Agency will not average past expenses, such as utility bills for the last several months, as a method of anticipating utility costs for the certification period.

(B) At certification and recertification, the household will report and verify all medical expenses. The household's monthly medical deduction for the certification period will be based on the information reported and verified by the household, and any anticipated changes in the household's medical expenses that can be reasonably expected to occur during the certification period based on available information about the recipient's medical condition, public or private insurance coverage, and current verified medical expenses.

The household will not be required to file reports about its medical expenses during the certification period.

NOTE: If the household voluntarily reports a change in its medical expenses, the Agency will verify the change prior to acting on the change, if the change would increase the household's allotment.

In the case of a reported change in a household's expenses that would decrease the household's allotment, or make the household ineligible, Agency will act on the change without requiring verification, though verification will be obtained during the household's recertification.

(4) Conversion of deductions

The income conversion procedures in **Section 13.1 Prospective Eligibility (G)** will also apply to expenses billed on a weekly or biweekly basis.

(5) Energy Assistance Payments

Except for payments made under the Low Income Energy Assistance Act of 1981, the Agency will prorate energy assistance payments over the entire heating or cooling season the payment is intended to cover.

13.6 CALCULATING NET INCOME AND BENEFIT LEVELS

(1) Net monthly income

To determine a household's net monthly income, the Agency will:

(A) Add the gross monthly income earned by all household members and the total monthly unearned income of all household members, minus income exclusions, to determine the household's total gross income.
(B) Multiply the total gross monthly earned income by 80 percent and add that to the total monthly unearned income, minus income exclusions.
(C) Subtract the standard deduction.
(D) If the household is entitled to ~~an excess~~ a medical deduction as provided in **Section 12.8 ~~Excess~~ Medical Deduction**, determine if total medical expenses exceed $35. If so, subtract that portion which exceeds $35.
(E) Subtract allowable monthly dependent care expenses, if any, for each dependent.
(F) Subtract allowable monthly child support payments in accordance with **Section 12.7 Child Support Deduction**.
(G) Subtract the homeless shelter deduction, if any, up to the maximum of $143.
(H) Total the allowable shelter expenses to determine shelter costs, unless a deduction has been subtracted. Subtract from total shelter costs 50 percent of the household's monthly income after all the above deductions have been subtracted. The remaining amount, if any,

is the excess shelter cost. If there is no excess shelter cost, the net monthly income has been determined (If the amount is a negative number, enter zero (0)).

(I) If there are excess shelter costs, subtract the excess shelter cost, up to the maximum excess shelter amount as noted in **Section 12.1 Income Deductions**, from the household's monthly income after all other applicable deductions. Households not subject to a capped shelter expense (See **Section 12.4(1) Excess Shelter Deduction**) shall have the full amount exceeding 50 percent of their net income subtracted. The household's net monthly income has been determined.

In calculating net monthly income, the Agency will not round at any step of the SNAP calculation.

(2) Eligibility

(A) Households which contain an elderly or disabled member as defined in **Section 14.10 Elderly and Disabled**, will have their net income, as calculated in **Section 13.6 Calculating Net Income and Benefit Levels (1) *Net monthly income*** (except for households considered destitute in accordance with **Section 13.7 Destitute Households**), compared to the monthly income eligibility standards below for the appropriate household size to determine eligibility for the month.

(B) In addition to meeting the net income eligibility standards, households which do not contain an elderly or disabled member will have their gross income, as calculated in accordance with paragraph **Section 13.6 Calculating Net Income and Benefit Levels (1) *Net monthly income* (A),** compared to the gross monthly income standards defined below for the appropriate household size to determine eligibility for the month.

Household size	Gross monthly income (130 percent of poverty)	Net monthly income (100 percent of poverty)
1	$1276	$981
2	$1726	$1328
3	$2177	$1675
4	$2628	$2021
5	$3078	$2368
6	$3529	$2715
7	$3980	$3061
8	$4430	$3408
Each additional member	$451	$347

(C) For households considered destitute in accordance with **Section 13.7 Destitute Households**, the Agency will determine a household's eligibility by computing its gross and net income according to **Section 13.6 Calculating Net income and Benefit Levels (1) *Net monthly income***, and comparing, as appropriate, the gross and/or net income to the corresponding income eligibility standard in accordance with **13.6 Calculating Net income and Benefit Levels (2) *Eligibility*.**

(D) If a household contains a member who is fifty-nine years old on the date of application, but who will become sixty before the end of the month of application, the Agency will determine the household's eligibility in accordance with **Section 13.6 Calculating Net Income and Benefit Levels (2) Eligibility (A).**

(E) If a household contains a student whose income is excluded in accordance **Section 11.6 Income Exclusions (A), (B)** or **(I)** and the student becomes 18 during the month of application, the Agency will exclude the student's earnings in the month of application and count the student's earnings in the following month.

(3) Benefits

Except as provided in **Section 13.2 Determining Household Eligibility (1) *Month of application*,** the household's monthly allotment will be equal to the maximum food stamp allotment for the household's size reduced by 30 percent of the household's net monthly income as calculated in **Section 13.6 Calculating Net income and Benefit Levels (1) *Net monthly income*.** If 30 percent of the household's net income ends in cents, the Agency will round the allotment down to the nearest lower dollar.

If the calculation of benefits for an initial month would yield an allotment of less than $10 for the household, no benefits will be issued to the household for the initial month.

Except during an initial month, all eligible one- and two-person households will receive minimum monthly allotments equal to the minimum benefit. For an eligible household with three or more members which is entitled to no benefits (except because of the proration requirements and the provision precluding issuances of less than $10 in an initial month), the Agency will deny the household's application on the grounds that its net income exceeds the level at which benefits are issued.

For those eligible households which are entitled to no benefits in their initial month of application, but are entitled to benefits in subsequent months, the Agency will certify the households beginning with the month of application.

When a household's circumstances change and it becomes entitled to a different income eligibility standard, the Agency will apply the different standard at the next recertification or whenever the

Agency changes the household's eligibility, benefit level or certification period, whichever occurs first.

(4) Thrifty Food Plan (TFP) and Maximum SNAP Allotments

Maximum SNAP allotments shall be based on the TFP as defined in **Section §271.2 of the Code of Federal Regulations at www.fns.usda.gov/snap**.

13.7 DESTITUTE HOUSEHOLDS

Migrant or seasonal farm worker households may have little or no income at the time of application and may be in need of immediate food assistance, even though they receive income at some other time during the month of application.

The following procedures will be used to determine when migrant or seasonal farm worker households in these circumstances may be considered destitute and, therefore, entitled to expedited service and special income calculation procedures. Households other than migrant or seasonal farm worker households will not be classified as destitute.

(A) Migrant or seasonal farm worker households whose only income for the month of application was received prior to the date of application, and was from a terminated source, shall be considered destitute households and shall be provided expedited service.

If income is received on a monthly or more frequent basis, it will be considered as coming from a terminated source if it will not be received again from the same source during the balance of the month of application or during the following month.

If income is normally received less often than monthly, the non-receipt of income from the same source in the balance of the month of application or in the following month is inappropriate to determine whether or not the income is terminated. For example, if income is received on a quarterly basis (e.g., on January 1, April 1, July 1, and October 1), and the household applies in mid-January, the income should not be considered as coming from a terminated source merely because no further payments will be received in the balance of January or in February. The test for whether or not this household's income is terminated is whether the income is anticipated to be received in April. Therefore, for households that normally receive income less often than monthly, the income will be considered as coming from a terminated source if it will not be received in the month in which the next payment would normally be received.

(B) Migrant or seasonal farm worker households whose only income for the month of application is from a new source will be considered destitute and swill be provided expedited service if income of more than $25 from the new source will not be received by the 10th calendar day after the date of application.

Income which is normally received on a monthly or more frequent basis will be considered to be from a new source if income of more than $25 has not been received from that source within 30 days prior to the date the application was filed.

If income is normally received less often than monthly, it will be considered to be from a new source if income of more than $25 was not received within the last normal interval between payments. For example, if a household applies in early January and is expecting to be paid every 3 months, starting in late January, the income will be considered to be from a new source if no income of more than $25 was received from the source during October or since that time.

Migrant or seasonal farm worker households may receive both income from a terminated source prior to the date of application, and income from a new source after the date of application, and still be considered destitute if they receive no other income in the month of application and income of more than $25 from the new source will not be received by the 10th day after the date of application.

Destitute households will have their eligibility and level of benefits calculated for the month of application by considering only income which is received between the first of the month and the date of application. Any income from a new source that is anticipated after the day of application will be disregarded.

Some employers provide travel advances to cover the travel costs of new employees who must journey to the location of their new employment. To the extent that these payments are excluded as reimbursements, receipt of travel advances will not affect the determination of when a household is destitute. However, if the travel advance is by written contract an advance of wages that will be subtracted from wages later earned by the employee, rather than a reimbursement, the wage advance will count as income. In addition, the receipt of a wage advance for travel costs of a new employee will not affect the determination of whether subsequent payments from the employer are from a new source of income, nor whether a household shall be considered destitute. For example, if a household applies on May 10, has received a $50 advance for travel from its new employer on May 1 which by written contract is an advance on wages, but will not receive any other wages from the employer until May 30, the household will be considered destitute. The May 30 payment will be disregarded, but the wage advance received prior to the date of application will be counted as income.

A migrant or seasonal farm worker household member who changes jobs but continues to work for the same employer will be considered as still receiving income from the same source. A migrant farm worker's source of income will be considered to be the grower for whom the migrant is working at a particular point in time, and not the crew chief. A migrant who travels with the same crew chief but moves from one grower to another will be considered to have moved from a terminated income source to a new source.

The above procedures will apply at initial application and at recertification, but only for the first month of each certification period. At recertification, income from a new source will be disregarded in the first month of the new certification period if income of more than $25 will not

be received from this new source by the 10th calendar day after the date of the household's normal issuance cycle.

13.8 CERTIFICATION PERIODS

The Agency must certify each eligible household for a definite period of time. The Agency must assign the longest certification period possible based on the predictability of the household's circumstances. The first month of the certification period will be the first month for which the household is eligible to participate. Upon the expiration of the certification period, further entitlement to SNAP benefits cannot be established without application by the household.

(1) Certification period length

Households should be assigned certification periods consistent with the following:

(A) 6 months, unless the household's circumstances are unstable.
(B) Households with unstable circumstances, such as households with zero net income, should be assigned certification periods consistent with their circumstances, but generally no less than 3 months.
(C) The Agency will certify for up to 24 months households in which all adult members are elderly or disabled with no earned income. The Agency must have at least one contact with each household every 12 months.
(D) Households may be assigned 1- or 2-month certification periods when it appears likely that the household will become ineligible for SNAP in the near future.

(2) Shortening certification periods

The Agency may not end a household's certification period earlier than its assigned termination date, unless the Agency receives information that the household has become ineligible, or the household has not complied with SNAP requirements. The State agency may not use the Notice of Expiration to shorten a certification period.

NOTE: Loss of public assistance or a change in employment status is not sufficient in and of itself to meet the criteria necessary for shortening the certification period.

13.9 CERTIFICATION NOTICES TO HOUSEHOLDS

(1) Initial applications

The Agency will provide applicants with one of the following written notices as soon as a determination is made, but no later than 30 days after the date of the initial application:

(A) Notice of eligibility.

1. If an application is approved, the Agency will provide the household with written notice of the amount of the allotment and the beginning and ending dates of the certification period. The household will also be advised of variations in the benefit level based on changes anticipated at the time of certification.

If the initial allotment contains benefits for both the month of application and the current month's benefits, the notice will explain that the initial allotment includes more than 1 month's benefits, and will indicate the monthly allotment amount for the remainder of the certification period. The notice will also advise the household of its right to a fair hearing, the telephone number of the SNAP office (a toll-free number or a number where collect calls will be accepted for households outside the local calling area), and, if possible, the name of the person to contact for additional information. If there is an individual or organization available that provides free legal representation, the notice shall also advise the household of the availability of the services.

2. In cases where a household's application is approved on an expedited basis without verification, the notice will explain that the household must provide the verification which was waived and the consequences of failure to provide the postponed verification.
3. For households provided a notice of expiration at the time of certification, the notice of eligibility may be combined with the notice of expiration or separate notices may be sent.

(B) Notice of denial. If the application is denied, the Agency will provide the household with written notice explaining the basis for the denial, the household's right to request a fair hearing, the telephone number of the SNAP office (a toll-free number or a number where collect calls will be accepted for households outside the local calling area), and, if possible, the name of the person to contact for additional information.

If there is an individual or organization available that provides free legal representation, the notice shall also advise the household of the availability of the service.

(C) Notice of pending status. If the application is to be held pending because some action by the household is needed to complete the application process, the notice will explain what action the household must take and that its application will be denied if the household fails to take the required action within 30 days of the date the application was filed. The Agency will include on the notice of pending status the date by which the household must provide the missing verification. For notices that must be translated, the client must be allowed at least ten days from the time the translated notice is mailed to provide the requested verification.

(2) Applications for recertification

The agency will provide households that have filed an application by the 15th of the last month of their certification period with either a notice of eligibility or a notice of denial by the end of the current certification period if the household has complied with all recertification requirements. The Agency will provide households that have received a notice of expiration at the time of

certification, and have timely reapplied, with either a notice of eligibility or a notice of denial not later than 30 days after the date of the household's initial opportunity to obtain its last allotment.

Chapter 14

Chapter 14 Determining Action on Households with Special Circumstances

14.1 TREATMENT OF INCOME AND RESOURCES OF CERTAIN NON-HOUSEHOLD MEMBERS

During the period of time that a household member cannot participate for the reasons addressed in this section, the eligibility and benefit level of any remaining household members will be determined in accordance with the procedures outlined in this section.

(1) Intentional Program violation (IPV), felony drug conviction, or fleeing felon disqualifications, and work requirement sanctions

The eligibility and benefit level of any remaining household members of a household containing individuals determined ineligible because of a disqualification for an intentional Program violation, a felony drug conviction, their fleeing felon status, or noncompliance with a work requirement of **Chapter 8 Work Provisions**, will be determined as follows:

(A) Income, resources, and deductible expenses. The income and resources of the ineligible household member(s) will continue to count in their entirety, and the entire household's allowable earned income, standard, medical, dependent care, child support, and excess shelter deductions will continue to apply to the remaining household members.

(B) Eligibility and benefit level. The ineligible member will not be included when determining the household's size for the purposes of:

i. Assigning a benefit level to the household;
ii. Comparing the household's monthly income with the income eligibility standards; or
iii. Comparing the household's resources with the resource eligibility limits. The Agency will ensure that no household's SNAP benefit allotment is increased as a result of the exclusion of one or more household members.

(2) SSN disqualifications

The eligibility and benefit level of any remaining household members of a household containing individuals determined to be ineligible for refusal to obtain or provide an SSN will be determined as follows:

(A) Resources. The resources of such ineligible members will continue to count in their entirety to the remaining household members.
(B) Income. A pro rata share of the income of such ineligible members will be counted as income to the remaining members. This pro rata share is calculated by first subtracting the allowable exclusions from the ineligible member's income and dividing the income evenly among the household members, including the ineligible members. All but the ineligible members' share is counted as income for the remaining household members.
(C) Deductible expenses. The 20 percent earned income deduction will apply to the prorated income earned by such ineligible members which is attributed to their households. That portion of the households' allowable child support payment, shelter and dependent care expenses which are either paid by or billed to the ineligible members will be divided evenly among the households' members including the ineligible members. All but the ineligible members' share is counted as a deductible child support payment, shelter or dependent care expense for the remaining household members. Eligibility and benefit level. Such ineligible members will not be included when determining their households' sizes for the purposes of:

i. Assigning a benefit level to the household;
ii. Comparing the household's monthly income with the income eligibility standards; or
iii. Comparing the household's resources with the resource eligibility limits.

(3) Ineligible alien

The State agency must determine the eligibility and benefit level of any remaining household members of a household containing an ineligible alien (see Section for rules pertaining to determining alien status) as follows:

(A) Resources. The resources of ineligible aliens will continue to count in their entirety to the remaining household members.
(B) Income. A pro rata share of the income of ineligible aliens will be counted as income to the remaining members. This pro rata share is calculated by first subtracting the allowable exclusions from the ineligible member's income and dividing the income evenly among the household members, including the ineligible members. All but the ineligible members' share is counted as income for the remaining household members.
(C) Deductible expenses. The 20 percent earned income deduction will apply to the prorated income earned by such ineligible members which is attributed to their households. That portion of the households' allowable child support payment, shelter and dependent care expenses which are either paid by or billed to the ineligible members will be divided evenly among the households' members including the ineligible members. All but the ineligible

members' share is counted as a deductible child support payment, shelter or dependent care expense for the remaining household members.

Exception: If the household is entitled to the MUA or BUA, the expense will *not* be prorated among the eligible household members. The entire expense for the MUA/BUA will be allowed for the household. See 12.5 Utility Allowances (5) multiple households/multiple residences. All other expenses, such as rent, actual utilities (if applicable), etc. will be prorated.

The Agency must not include the resources and income of the sponsor and the sponsor's spouse in determining the resources and income of an ineligible sponsored alien.

(4) Reduction or termination of benefits within the certification period

Whenever an individual is determined ineligible within the household's certification period, the Agency will determine the eligibility or ineligibility of the remaining household members based, as much as possible, on information in the case file.

(A) Excluded for intentional Program violation disqualification. If a household's benefits are reduced or terminated within the certification period because one of its members was excluded because of disqualification for intentional Program violation, the Agency will notify the remaining members of their eligibility and benefit level at the same time the excluded member is notified of his or her disqualification.

The household is not entitled to a notice of adverse action but may request a fair hearing to contest the reduction or termination of benefits, unless the household has already had a fair hearing on the amount of the claim as a result of consolidation of the administrative disqualification hearing with the fair hearing.

(B) Disqualified or determined ineligible for reasons other than intentional Program violation. If a household's benefits are reduced or terminated within the certification period for reasons other than an Intentional Program Violation disqualification, the Agency will issue a notice of adverse action in accordance with **Section 16.1 Use of Notice** which informs the household of the ineligibility, the reason for the ineligibility, the eligibility and benefit level of the remaining members, and the action the household must take to end the ineligibility.

14.2 TREATMENT OF INCOME AND RESOURCES OF OTHER NON-HOUSEHOLD MEMBERS

For all other non-household members defined in **Section 2.2 Special Household Requirements (1) *Required household combinations*** and **Section 2.2 Special Household Requirements (2) *Elderly and disabled persons*** who are not specifically mentioned in **Section 14.1 Treatment of**

Income and Resources of Certain Non-household Members, the income and resources of such individuals will not be considered available to the household with whom the individual resides.

Cash payments from the non-household member to the household will be considered income under the normal income standards set in **Section 11.2 Definition of Income**.

Vendor payments, as defined in **Section 11.6 Income Exclusions**, will be excluded as income. If the household shares deductible expenses with the non-household member, only the amount actually paid or contributed by the household will be deducted as a household expense. If the payments or contributions cannot be differentiated, the expenses will be prorated evenly among persons actually paying or contributing to the expense and only the household's pro rata share deducted.

When the earned income of one or more household members and the earned income of a non-household member are combined into one wage, the income of the household members will be determined as follows:

(A) If the household's share can be identified, the State agency shall count that portion due to the household as earned income.
(B) If the household's share cannot be identified, the Agency will prorate the earned income among all those whom it was intended to cover and count that prorated portion to the household.

Such non-household members shall not be included when determining the size of the household for the purposes of:

i. Assigning a benefit level to the household;
ii. Comparing the household's monthly income with the income eligibility standards; or
iii. Comparing the household's resources with the resource eligibility limits.

14.3 RESIDENTS OF DRUG AND ALCOHOL TREATMENT AND REHABILITATION PROGRAMS (DAA'S)

Alcoholics or narcotic addicts who regularly participate in publicly operated or non-profit drug addict or alcoholic (DAA) treatment and rehabilitation programs on a resident basis may apply for SNAP benefits. Residents must be certified as one person households unless their children are residing with him/her, in which case the children must be included in the household (See exceptions in section **2.3 (8) (B) Ineligible Household Members**). Any meals served to the children by the DAA treatment center are eligible for purchase with SNAP benefits.

(1) DAA Eligibility for SNAP

In order for the alcoholic/addict to be eligible for SNAP participation, the DAA treatment center must provide evidence that it is tax exempt and certified by the State agency responsible for the treatment and rehabilitation of drug addicts or alcoholics (the State Title XIX Agency) as:

- Receiving funding under part B of title XIX; **OR**
- Eligible to receive funding under part B of title XIX even if no funds are being received; **OR**
- Operating to further the purposes of part B of title XIX, to provide treatment and rehabilitation of drug addicts and/or alcoholics. **OR**
- Authorized as a retailer by FNS.

The Agency must verify that the DAA center meets the above requirements before it determines any residents of the DAA center eligible for SNAP benefits. The DAA center must provide verification of this status by providing a copy of a letter, license, or other certification issued by the Title XIX agency acknowledging that the facility meets one of the standards for certification listed above. State licensing of the DAA will not be required for SNAP participation.

If the DAA center in question offers an alternative model of treatment or rehabilitation not eligible for licensing by the State, the Title XIX agency should still make a determination as to whether or not the facility is operating to further the purpose of Part B of Title XIX, to provide treatment and rehabilitation of drug addicts and/or alcoholics. A letter from the Title XIX agency acknowledging that the facility is operating for this purpose will serve as verification. If FNS has authorized the DAA center as a retailer, this authorization will serve as verification.

South Carolina's state Title XIX agency is the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS). The DAA treatment center may obtain certification from DAODAS that they are either receiving funding under Part B of Title XIX, eligible to receive funding under Part B of Title XIX even though no funds are being received or operating in a manner that furthers the purpose of Part B of Title XIX to provide treatment and rehabilitation of drug addicts and/or alcoholics.

Website address: http://www.daodas.state.sc.us/

Once this certification is obtained, residents may be eligible for SNAP participation.

(2) Authorized Representatives for SNAP participants in DAA

The residents of DAA treatment centers must apply and be certified for SNAP benefits through the use of an authorized representative who is employed by the center and designated by the center for that purpose. The Agency will require the household to designate the DAA treatment center as its authorized representative for the purpose of receiving and using the allotment on behalf of the household.

Once the household leaves the DAA treatment center, the center can no longer act as authorized representative for application or issuance purposes.
The local county DSS office must ensure that each authorized representative, as well as the DAA treatment center Director, has received a copy of DSS Brochure 1622, What You Need to Know! Food Stamp Eligibility for Residents, prior to being named as an authorized representative.

(3) Processing Provisions for DAA's

Residents of DAA treatment centers are not allowed to apply on their own behalf. Residents of DAA treatment centers are certified by using the same provisions that apply to all other households, including but not limited to, the same rights to notices of adverse actions and fair hearings.

A DAA treatment center or group living facility must take the following actions:

(A) Provide the local county DSS office with a monthly or semimonthly certified list of residents currently participating in the SNAP. The local county DSS office must conduct periodic random on-site visits to the DAA treatment center to assure accuracy of the list and to ensure that DSS records are consistent and up-to-date.

(B) Provide the local county DSS office with a statement signed by a responsible DAA treatment center official attesting to the validity of the above mentioned list.

(C) Notify the local county DSS office of changes in the household's income and other changes in the household's circumstances.

(D) Notify the local county DSS office when a resident recipient leaves the DAA treatment center.

(E) Provide the household with its EBT card to use for any benefits remaining in the EBT account when a resident recipient leaves the DAA treatment center. If the household has left the DAA treatment center prior to this being accomplished, the EBT card must be returned to the local county DSS office.

(F) Inform the household that they must report their change in address and other circumstances to the local county DSS office within 10 days.

(4) SNAP benefits on leaving the DAA

If the household leaves the DAA treatment center prior to using any of the household's allotment, the center must provide the allotment to the household. If the household has already left the DAA treatment center, the center must return the allotment to the local county DSS office.

If the household leaves the DAA treatment center prior to the 16th of the month and the benefits have been issued and any portion used on behalf of the household, the center will provide the household with 1/2 of its monthly benefits. If the household leaves on or after the 16th of the

month, the DAA treatment center will provide the household with a prorated amount of benefits based on the day the household leaves the center and the allotment amount.

The DAA treatment center must return to the local county DSS office any EBT cards or benefits not provided to departing residents by the end of the month. These benefits may include those not provided to departing residents because they left either prior to the 16th and the DAA treatment center was unable to provide the household with the benefits or the household left on or after the 16th of the month and the benefits were not returned to the household.

(5) DAA Center's Responsibility

The DAA treatment center is responsible for any misrepresentation or intentional program violation (IPV) which it knowingly commits in the certification of center residents. As an authorized representative, the DAA treatment center must be knowledgeable about household circumstances and should carefully review these circumstances with residents prior to applying on their behalf. The DAA treatment center is liable for all losses or misuse of EBT cards or benefits held on behalf of resident households and for all over-issuances which occur while the households are residents of the center.

(6) DAA's Misuse of Benefit

DAA treatment centers which are authorized by FNS as a retailer may be penalized or disqualified if it is determined administratively or judicially that SNAP benefits were misappropriated or used for purchases that did not contribute to a certified household's meals. The local county DSS office will notify the SNAP Benefit Integrity Coordinator at State Office when it has reason to believe that the DAA treatment center is misusing benefits. The SNAP Benefit Integrity Coordinator will coordinate with USDA FNS on the referral. The Agency will take no action prior to FNS action against the DAA treatment center. If any over-issuances are discovered during an investigation or hearing procedure for redemption violations, a claim will be established. If FNS disqualifies the DAA treatment center as an authorized retailer, the local county DSS office will suspend the center's authorized representative status for the same time period.

14.4 RESIDENTS OF A GROUP LIVING ARRANGEMENT (GLA)

A group living arrangement (GLA) is a public or private nonprofit residential setting that serves no more than 16 residents and is certified by the appropriate State agency. Prior to certifying any residents, the Agency must verify that the GLA is either:

(A) Authorized by FNS **OR**

(B) Certified by the appropriate state agency including the agency's determination that the center is a nonprofit organization

To be eligible for the SNAP, residents of GLA's must be blind or disabled (See exceptions in section **2.3 (8) (C) Ineligible Household Members**).

(1) GLA Eligibility for SNAP

Disabled or blind residents of a GLA may apply as follows:

(A) Through the use of an authorized representative employed and designated by the GLA

(B) Through an authorized representative of their choice **OR**

(C) On their own behalf.

The GLA must determine if any resident can apply on his/her own behalf. The determination is based on the resident's physical and mental ability to handle his/her own affairs.

(2) Authorized representatives for SNAP participants in GLA's

Some residents of the GLA may apply on their own behalf while other residents of the same GLA may apply through the GLA's representative.

The local county DSS office must ensure that each authorized representative, as well as the GLA Director, has received a copy of DSS Brochure 1622, What You Need to Know! Food Stamp Eligibility for Residents, prior to being named as an authorized representative

(3) Processing Provisions for GLA's

For residents who apply through an authorized representative of their choice or who apply on their own behalf, household size is handled in accordance with normal processing standards. These residents are certified using the same provisions that apply to all other households. The household is responsible for reporting changes in their income and household circumstances to the county office.

For residents who apply through the use of the GLA's authorized representative, their eligibility must be determined as a one-person household.

The GLA must take the following actions:

(A) Provide the local county DSS office with a monthly certified list of residents currently participating in the SNAP. The local county DSS office must conduct periodic random on-site visits to the GLA to assure accuracy of the list and to ensure that DSS records are consistent and up-to-date.

(B) Provide the local county DSS office with a statement signed by a responsible GLA official attesting to the validity of the above mentioned list.

(C) Notify the local county DSS office, if acting as the authorized representative, of changes in the household's income and other changes in the household's circumstances or when a resident recipient leaves the GLA.

(D) Provide the household with its EBT card to use for any benefits remaining in the EBT account when a resident recipient leaves the GLA. If the household has left the GLA treatment center prior to this being accomplished, the EBT card must be returned to the local county DSS office.

(E) Once the resident leaves the GLA, the GLA may no longer act as his/her authorized representative. The GLA shall inform the household to report their new address and any changes in circumstances after leaving the GLA within 10 days.

(4) SNAP benefits on leaving the GLA

For residents who apply through the use of the GLA authorized representative, the following procedures apply:

If the household leaves the GLA prior to using any of the household's allotment, the GLA must provide the allotment to the household.
If the household leaves the GLA prior to the 16th day of the month and the benefits have been issued and any portion used on behalf of the household, the GLA will provide the household with 1/2 of its monthly benefits. If the household leaves on or after the 16th of the month and the benefits have already been issued and used, the household will not receive any benefits. If the household leaves on or after the 16th of the month and the benefits have not been issued or used, the GLA will provide the household with a prorated amount of benefits based on the day the household leaves the GLA and the allotment amount.

The GLA must return to DSS any EBT cards or benefits not provided to departing residents at the end of each month. The returned benefits include those not provided to departing residents because they left on or after the 16th day of the month or they left prior to the 16th and the GLA was unable to provide them with benefits.

For residents certified on their own behalf, SNAP benefits may either be returned to the GLA to be used to purchase meals served either communally or individually to eligible residents or retained and used to purchase and prepare food for their own consumption. The GLA may purchase and prepare food to be consumed by eligible residents on a group basis if residents normally obtain their meals at a central location as part of the GLA's service or if meals are prepared at a central location for delivery to the individual residents. If personalized meals are prepared and paid for with SNAP benefits, the GLA must ensure that the resident's SNAP benefits are used for meals intended for that resident.

If a group of residents have been certified as one household and have returned the benefits to the GLA to use, the departing residents will be given a pro-rata share of 1/2 of the allotment if leaving prior to the 16th day of the month.

(5) GLA's Responsibility

The GLA is responsible for any misrepresentation or intentional program violation (IPV) which it knowingly commits in the certification of GLA residents.
As an authorized representative, the GLA must be knowledgeable about household circumstances and should carefully review these circumstances with residents prior to applying on their behalf.
As an authorized representative, the GLA is liable for all losses or misuse of EBT cards or benefits held on behalf of resident households and for all over-issuances which occur while the households are residents of the GLA.

(6) GLA's Misuse of Benefits

GLA's authorized by FNS as a retailer may be penalized or disqualified if it is determined administratively or judicially that SNAP benefits were misappropriated or used for purchases that did not contribute to a certified household's meals.

The local county DSS office will notify the SNAP Benefit Integrity Coordinator at State Office when it has reason to believe that the GLA is misusing benefits. The SNAP Benefit Integrity Coordinator will coordinate with USDA FNS on the referral. The Agency will take no action prior to FNS action against the GLA. If any over-issuances are discovered during an investigation or hearing procedure for redemption violations, a claim will be established. If FNS disqualifies the GLA as an authorized retailer, the local county DSS office will suspend the center's authorized representative status for the same time period.

14.5 SHELTER FOR BATTERED WOMEN AND CHILDREN

A shelter for battered women and children is a public or private nonprofit residential facility that serves battered women and their children (See exceptions in section **2.3 (8) (D) Ineligible Household Members**). If such a facility serves other individuals, a portion of the facility must be set aside on a long-term basis to serve only battered women and children.

Shelter residents who are included in households already certified may apply for and, if otherwise eligible, participate as a separate household if the certified household listing them as members also contains the person who abused them. Residents may receive an allotment as a separate household only once a month. The local county DSS office must take prompt action to ensure that the former household's eligibility or benefits reflects the change in the household's composition.

Shelter residents who apply as a separate household will be certified solely on the basis of their income and resources and the expenses for which they are responsible. They must be certified without regard to the income, resources and expenses of their former household.

Jointly held resources are considered inaccessible if the resources are jointly owned by shelter residents and by members of their former household and if the shelter resident's access to the value of the resources is dependent on the agreement of a joint owner who still resides in the former household.

14.6 HOMELESS SNAP HOUSEHOLDS

Homeless SNAP households will be permitted to use their SNAP benefits to purchase prepared meals from homeless meal providers authorized by FNS (See exceptions in section **2.3 (8) (E) Ineligible Household Members**).

14.7 PRERELEASE APPLICANTS FOR SNAP

A household which consists of a resident or residents of a public institution(s) which applies for SSI under SSA's Prerelease Program for the Institutionalized will be allowed to apply for SNAP benefits jointly with their application for SSI prior to their release from the institution.

14.8 TREATMENT OF FI SANCTIONS IN THE SNAP

(1) Failure to comply

An FI household may be sanctioned due to failure to comply with the requirements of the FI Program. An FI sanction may occur due to the reasons listed below:

(A) Failure to meet enumeration requirements

(B) Failure of an FI recipient under age 19 to be enrolled in school and maintain satisfactory attendance

(C) Failure to comply with the Child Support Enforcement Division

(D) Failure to comply with the work requirements of the FI Program (See **8.5 Failure to Comply with SNAP Work Requirements**)

A sanction for any of the previous reasons will result in a decreased FI benefit. A decreased FI benefit will usually result in an increased SNAP allotment for the household; however, due to federal regulations, the household must not receive an increase in SNAP benefits.

This provision does not apply to initial FI applications or when a new member is determined ineligible. The individual or household against whom the penalty is imposed must have been

receiving FI benefits that are reduced, suspended or terminated due to a failure to comply with a FI Program requirement or the individual or household has applied for continued benefits and there is no break in participation.

This provision only applies to individuals who are receiving SNAP benefits at the time of failure to comply with the requirements of the FI Program. In addition, this provision does not apply to situations such as:

- Reaching a time limit for time-limited benefits
- Having a child that is not eligible because of the family cap
- Failing to complete the FI annual redetermination process
- Failing to perform an action that the individual is unable to perform as opposed to refusing to perform **OR**
- Failing to comply with a purely procedural requirement. A procedural requirement, which would not trigger an FS sanction, is a step that an individual must take to continue receiving benefits in the program such as providing verification of circumstances.

This provision does pertain to individuals included in the SNAP household including ineligible household members.

(2) Budgeting

The SNAP benefits will be calculated using the benefit amount the household would have received if the FI benefit had not been decreased due to the noncompliance with FI requirements. An increase in the SNAP benefits will be prohibited for the duration of the FI penalty.

For cases where the household is no longer receiving FI, the Agency must remove the amount by which the FI benefit would be reduced from the SNAP budget at the end of one year. The amount by which the FI benefit would be reduced will be budgeted in the SNAP case at the time the FI benefit is reduced.

(3) Length of the SNAP failure to comply penalty

The amount by which the FI benefit is reduced continues to be budgeted in the SNAP benefit calculation until one of the following occurs:

(A) The FI sanction is cured.

(B) The sanctioned individual meets the exemption/deferral criteria for FI work requirements

(C) The household is no longer eligible for FI benefits due to one of the following:

- Excess income
- Resources
- No eligible child(ren)
- Expiration of time limits
- Receipt of SSI
- Disqualification due to ineligible or questionable alien/citizenship status, fleeing felon status, drug conviction status or conviction for fraudulently misrepresenting residency or identity in order to receive benefits in more than one state or county.

For cases where the household is no longer receiving FI, the prohibition on the increase in SNAP benefits cannot exceed a one year time period.

Even if the household does not meet one of the criteria prior to the end of the one year time period, the amount by which the FI benefit is reduced is still removed from the SNAP budget at the end of the one year time period.

Any household that applies for SNAP and is receiving a reduced FI benefit because a person in the household has committed a failure to comply will not receive an increased SNAP benefit because of this sanction for the remainder of the FI sanction period.

(4) Household responsibility

It is the responsibility of the household to report any change that would affect a FI sanction. The household must reapply for FI in order to cure the FI sanction and remove the penalty income amount unless the household is no longer eligible for FI due to:

- Excess income
- Resources
- No eligible children \
- Expiration of time limits
- Receipt of SSI **OR**
- Disqualification due to ineligible or questionable citizen status, fleeing felon status, drug conviction status, or conviction for fraudulently misrepresenting residence or identity in order to receive benefits in more than one state or county.

The Agency must communicate with the FI staff to determine if the household meets any of these criteria. The Agency must lift the prohibition on the increased benefits when the Agency is notified or becomes aware of a cure, exemption or deferral. The prohibition on increased benefits would not be reinstated unless the household is sanctioned again for failure to comply with the requirements of the FI Program.

14.9 PARTICIPATION OF DECEASED INDIVIDUALS

The SNAP must ensure that benefits are not issued to any individual who is deceased. In order to provide this assurance, the Agency has entered into an agreement with the Social Security Administration (SSA) to obtain information from SSA about individuals who are deceased. This information must be used to ensure that SNAP benefits are not issued to deceased individuals.
The State Verification and Exchange System (SVES) will provide eligibility staff access to information on deceased individuals furnished by SSA.
A request for information on deceased individuals on all applicants/ recipients must be made at the following times:

- Application prior to approval
- Any face-to-face or telephone interview for recertification
- As necessary to determine eligibility.

The certification process must not be delayed beyond the processing standards if the SVES data is not available. If information is received after certification, the Agency must take immediate action to affect any changes, if appropriate. The Agency should use information provided by the household if more current and/or accurate than available SVES information.

Information on deceased individuals obtained from SVES is not considered verified upon receipt. The Agency must obtain independent verification as follows:

(A) For a one-person household where SVES is reporting this individual is deceased, the Agency should obtain verification through a newspaper obituary, contact with family members of the deceased, or other appropriate means.

(B) For a household with more than one person where SVES is reporting a household member as deceased, the Agency should contact the remaining household members in writing regarding the information which was received.

Upon receipt of the independent verification, the Agency must properly notify the household of any action to be taken on the case. If the verification is not received timely, the Agency must send the household a timely notice for failure to cooperate in establishing continued eligibility. The Agency does not have to send a closure notice on cases where all household members have died. However, the CHIP Notice C320 may be used to inform family members of the deceased individual that the SNAP case has been closed.

14.10 DEFINITION OF ELDERLY OR DISABLED

An elderly or disabled member is a member of a household who:

1) Is age 60 or older **OR**

2) Meets the definition of disabled under section 5.1(5) Disability

Chapter

15

Chapter 15 Change Reporting Requirements

15.1 HOUSEHOLD RESPONSIBILITY TO REPORT

All applicants/recipients must report certain changes in their circumstances. The Agency must take appropriate action on all changes to determine if the change affects the household's eligibility or allotment.

15.2 CHANGES DURING THE APPLICATION FOR CERTIFICATION PROCESS

Applicant households are required to report any change(s) which has occurred in its circumstances since filing the application at the certification interview; however, reportable changes which occur after the interview, but before notification of eligibility, must be reported by the household by the tenth day of the month following the month in which the household receives the notice of eligibility.

15.3 SIMPLIFIED REPORTING HOUSEHOLDS

Simplified reporting allows the Agency to reduce and simplify the rules under which most SNAP participants inform the state about changes in their income and circumstances during a certification period.

At the initial certification, annual recertification, six month recertification, and when the Agency transfers households to simplified reporting, the Agency must provide the household with the following:

- A written and oral explanation of how simplified reporting works;
- A written and oral explanation of the reporting requirements including:
- What needs to be reported and verified;
- When the report is due;
- How to obtain assistance; and

- The consequences of failing to file a report.
- Special assistance in completing and filing periodic reports to households whose adult members are all either mentally or physically handicapped or are non-English speaking or otherwise lacking in reading and writing skills such that they cannot complete and file the required report; and
- A telephone number (toll-free number or a number where collect calls will be accepted outside the local calling area) which the household may call to ask questions or to obtain help in completing the periodic report.

Households in which all adult members are elderly or disabled with no earned income are assigned a twenty four month certification period. Under simplified reporting rules these households are subject to annual (12 month) reporting requirements. These households are only required to report if the household's gross income exceeds 130% of poverty. This change must be reported within the first 10 days of the month after occurrence. The DSS Form 3808 is used as the change reporting document for annual reporters. The DSS Form is mailed to households on the first of the month it is due for completion. It must be returned to the county office by the 15th of the same month. Upon receipt by the county office, the form is registered as received on CHIP screen MRRE. The date received must be within the month in which the annual report is due. Incomplete forms which contain the household's signature, name and address or forms filed by the authorized representative must be accepted. If the form is incomplete or lacks verification the "Verification Complete" field must be changed to "N".

SNAP households, with the exception of those in which all adult members are elderly or disabled with no earned income, are subject to simplified reporting requirements within each six month certification. These households are required to report any change in the household's situation only at the annual recertification or the six month recertification, unless the household's gross income exceeds 130% of poverty. This change must be reported within the first 10 days of the month after occurrence. Although the six month recertification does not require an interview, either face to face or telephone, these households do have the right to a face-to-face or telephone interview if one is requested by the household or its authorized representative.

15.4 INTERIM CHANGES FOR SIMPLIFIED REPORTING HOUSEHOLDS

(1) Interim changes considered verified upon receipt

Regardless of a household's reporting requirement, the Agency must take action on the following changes, considered verified upon receipt, regardless of whether the change causes an increase or decrease in the SNAP allotment:

(A) BENDEX information on IEVS
(B) SDX information on IEVS
(C) Child support income changes received through the CSED/CHIP interface

(D) Changes reported for TANF (FI) only if the change results in a change in the TANF (FI) benefit amount
(E) Employment information received from E & T
(F) Fleeing Felon Alerts*

*Act on confirmation of the information as verified upon receipt by contacting FIOS at (803) 734-9301.

(2) Interim changes reported by the household that must be acted on

Although simplified reporting households are not required to report any interim changes unless the household's gross income exceeds 130% of poverty, the household may report any changes it chooses to report. If the household reports one of the following, the Agency must take action on the change, regardless of whether the change causes an increase or decrease in the SNAP allotment:

(A) Household member(s) moving from one SNAP household to another SNAP household
(B) Death of **any** household member(s).
(C) Relocation of any household member(s) out-of-state. This change may also be reported to the SNAP certification worker by a SNAP agency outside of South Carolina and the certification worker must take action on the change, regardless of whether the change causes an increase or decrease in the SNAP allotment.
(D) The household requests case closure.
(E) Household member(s) removed from a SNAP household by SCDSS Child Protective Services (CPS) or SCDSS Adult Protective Services (APS). This change may also be reported to the SNAP certification worker by SCDSS Child Protective Services (CPS) or SCDSS Adult Protective Services (APS) and the Agency must take action on the change, regardless of whether the change causes an increase or decrease in the SNAP allotment.

(3) Other interim changes reported by the household

Although simplified reporting households are not required to report any interim changes unless the household's gross income exceeds 130% of poverty, the household may report any changes it chooses to report. Other than changes addressed in **Section 15.4 Interim Changes for Simplified Reporting Households 1. *Interim changes considered known to the Agency*** and **2. *Interim changes reported by the household that must be acted on*,** the Agency must determine if the change reported by the household will cause an increase or decrease in the monthly benefit. The Agency will only act on an interim change reported by the household if it causes an increase in benefits. The Agency will not act on a change causing a decrease until the next mandatory action requiring a re-budget of SNAP benefits occurs. **Exception: when the household reports a loss of income due to voluntary quit of a household member subject to work registration and it is determined that this voluntary quit was without good cause, the agency should impose the**

sanction regardless of the effect that it has on the benefit (increase or decrease). **See Section 8.11 (4)**

Note: The EW should consider the net effect of all changes (which have been reported up to that time) when deciding on whether to make a change.

15.5 ACTIONS ON REPORTED CHANGES

(1) Increase in benefits

The following procedures must be followed when a reported change results in an increase in benefits:

(A) The Agency must increase the benefits for the month following the month the change is reported.

(B) If the change is reported too late in the month to adjust the benefits for the following month, the Agency must issue supplemental benefits, provided verification of the change is received within 10 days from the date requested. For notices that must be translated, allow ten days from the date the translated notice is sent.

(C) The Agency must not issue supplemental benefits in the month the change is reported.

(D) The Agency must not issue supplemental benefits if verification is not received within 10 days.

NOTE: ***A household subject to simplified reporting may report a change in expenses during the reporting period that will increase benefits but fail to provide verification of the change. If this situation occurs, the previous amount of expenses will continue to be budgeted in the SNAP case.***

(2) Decrease in benefits

The following procedures must be followed for all households subject to simplified reporting requirements when acting on a mandatory decrease in benefits as outlined in section 15.4 or when closing a case because the household's gross income exceeds 130% of poverty or the household:

(A) If sufficient information is reported to make a change resulting in a decrease in benefits or ineligibility, the Agency must issue **appropriate** notice (timely or adequate) as outlined in **Chapter 16, Notice of Adverse Action**.

(B) If insufficient information is reported to effect the change, the household must be given 10 days to provide verification. This must be documented in the case file.

(C) If no response, the timely notice is used to notify the household of reduction or termination.

(D) Ineligibility or decrease in benefits is effective the month following the expiration of the timely notice unless a fair hearing and continuation of benefits is requested.

15.6 ACTION ON INTERIM REPORTING HOUSEHOLDS

The Agency must take action on a complete interim reporting form and authorize benefits. If the form is incomplete and verification is not provided, the household's benefits are terminated if continued eligibility cannot be determined. The interim reporting form is due in the county office by the 15th of the month in which it is due in order for the interim report to be considered filed timely. The household is entitled to uninterrupted benefits if a completed interim report form is filed timely.

When the interim reporting form is received incomplete, whether timely or untimely, the Agency must notify the household. The notice must include what is needed to make the form complete, when the information or verification must be received, and what will happen if the information or verification is not received timely.

If an incomplete form is filed timely but the household does not provide required verification by the end of the month in which the report is due, the certification period is terminated at the end of that month. If the household files the form between the 16th and the last day of the month, the household loses its entitlement to uninterrupted benefits, but is entitled to a determination of benefits within 30 days from the date the interim reporting form was received by the county.

If the household files the form between the 16th and the last day of the month in which it is due but does not provide required verification within 30 days from the date the form was received by the county, certification is terminated.

The Agency must revert to open on CHIP any case where the interim reporting form received by the last working day of the month but the Agency failed to acknowledge its receipt on CHIP.

Failure to provide verification of a reported expense may result in the exclusion of that deduction.

15.7 UNCLEAR INFORMATION

The Agency may receive information about changes in the household's circumstances from which the effect of the change on the household's benefit amount cannot be determined. The Agency may receive this unclear information from a third party or from the household. The following procedure must be followed to clarify and verify the household's circumstances:

(A) **The Agency must** issue a written request for contact (RFC) which clearly advises the household of the verification it must provide or the actions it must take to clarify its circumstances and the consequences if the household fails to respond. The household must

be given 10 days to respond to this request. For notices that must be translated, allow ten days from the date the translated notice is sent.

(B) If the household does not respond to the request for contact, or does respond but refuses to provide sufficient information to clarify its circumstances, the Agency must send the household a notice of adverse action which closes the SNAP case.

NOTE: ***The Notice of Adverse Action (NOAA) cannot be used to advise the household of the verification needed or actions it must take to clarify its circumstances. This is the purpose of the request for contact. The NOAA should be used to notify the household of the case closure that results from the failure to provide verification or take needed action.***

(C) If the household responds to the request for contact and provides sufficient information, the Agency must adjust the household's benefit amount by acting on the new circumstances according to simplified reporting rules.

NOTE: ***The request for contact may only be issued when the Agency becomes aware of a change in the household's circumstances that calls into question the household's continued eligibility or current level of benefits.***

15.8 MASS CHANGES

Changes initiated by the state or federal government which may affect the entire caseload or significant portions of the SNAP caseload are defined as mass changes. Mass changes that may affect the SNAP Program include, but are not limited to:

- Adjustments to net income eligibility standards
- Adjustments to shelter/utility deductions
- Adjustments to the thrifty food plan and standard deduction
- Annual and seasonal adjustments to SSA, SSI and other federal benefits
- Periodic adjustments to TANF (FI) payments
- Other changes in the eligibility criteria based on legislative or regulatory actions.

Chapter 16 Notice of Adverse Action

16.1 USE OF NOTICE

Prior to any action to reduce or terminate a household's benefits within the certification period, the Agency will, except as provided in **Section 16.2 Exemptions from Notice**, provide the household timely and adequate advance notice before the adverse action is taken.

The notice of adverse action will be considered timely if the advance notice period includes at least 10 days from the date the notice is mailed to the date upon which the action becomes effective. Also, if the adverse notice period ends on a weekend or holiday, and a request for a fair hearing and continuation of benefits are received the day after the weekend or holiday, the Agency will consider the request timely received.

***NOTE**: Certification workers should count backwards 12 days from the first day of the month that the action will be effective.*

The notice of adverse action will be considered adequate if it explains in easily understandable language:

- The proposed action;
- The reason for the proposed action;
- The household's right to request a fair hearing;
- The telephone number of the food stamp office (toll-free number or a number where collect calls will be accepted for households outside the local calling area) and, if possible, the name of the person to contact for additional information;
- The availability of continued benefits; and
- The liability of the household for any over-issuances received while awaiting a fair hearing if the hearing official's decision is adverse to the household.
- If there is an individual or organization available that provides free legal representation, the notice will also advise the household of the availability of the service.

The Agency may provide adequate notice by notifying a household that its benefits will be reduced or terminated, no later than the date the household receives, or would have received, its allotment, if the following conditions are met:

(A) The household reports the information which results in the reduction or termination.
(B) The reported information is in writing and signed by the household.
(C) The Agency can determine the household's allotment or ineligibility based solely on the information provided by the household.
(D) The household retains its right to a fair hearing as allowed **Chapter 18 Fair Hearings.**
(E) The household retains its right to continued benefits if the fair hearing is requested within the time period set by the Agency in accordance with **Section 18.3 Continuation of Benefits (1) Timely request for a fair hearing**.
(F) The Agency continues the household's previous benefit level, if required, within five working days of the household's request for a fair hearing.

16.2 EXEMPTIONS FROM NOTICE

Individual notices of adverse action will not be provided when:

(A) The State initiates a mass change as described in **Section 15.8 Mass Changes**
Exception: A notice of adverse action must be sent if an annual and/or seasonal adjustment to SSA, SSI and other federal benefits results in the termination or decrease of a household's benefits.
(B) The Agency determines based on reliable information that all members of a household have died.
(C) The Agency determines, based on reliable information that the household has moved from the State.
(D) The household has been receiving an increased allotment to restore lost benefits, the restoration is complete, and the household was previously notified in writing of when the increased allotment would terminate.
(E) The household's allotment varies from month to month within the certification period to take into account changes which were anticipated at the time of certification, and the household was so notified at the time of certification.
(F) The household jointly applied for TANF and SNAP benefits and has been receiving SNAP benefits pending the approval of the TANF grant and was notified at the time of certification that SNAP would be reduced upon approval of the TANF grant.
(G) A household member is disqualified for intentional Program violation (IPV), in accordance with **Section 20.4 SNAP Disqualification for an Intentional Program Violation (IPV),** or the benefits of the remaining household members are reduced or terminated to reflect the disqualification of that household member.
(H) The Agency has assigned a longer certification period to a household certified on an expedited basis and for whom verification was postponed, provided the household has received written notice that the receipt of benefits beyond the month of application is contingent on its

providing the verification which was initially postponed and that the Agency may act on the verified information without further notice.

(I) Converting a household to benefit reduction as a result of failure to make agreed upon repayment as discussed in **Section 23.7 Collection of Recipient Claims.**

(J) The Agency is terminating the eligibility of a resident of a drug or alcoholic treatment center (DAA) or a group living arrangement (GLA) if the facility loses either its certification from the appropriate agency or agencies of the State or has its status as an authorized representative suspended due to FNS disqualifying it as a retailer. However, residents of group living arrangements applying on their own behalf are still eligible to participate.

(K) The household voluntarily requests, in writing or in the presence of a caseworker, that its participation be terminated. If the household does not provide a written request, the Agency will send the household a letter confirming the voluntary withdrawal. Written confirmation does not entail the same rights as a notice of adverse action except that the household may request a fair hearing.

(L) The Agency determines, based on reliable information that the household will not be residing in the State and, therefore, will not be entitled to obtain its next allotment. The Agency will inform the household of its termination no later than its next scheduled issuance date.

While the Agency may inform the household before its next issuance date, the Agency will not delay terminating the household's participation in order to provide advance notice.

(M) The Agency initiates recoupment of a claim as specified in **Section 23.9 Delinquent Recipient Claims** against a household which has previously received a notice of adverse action with respect to such claim.

16.3 ADEQUATE NOTICE WHEN THE HOUSEHOLD'S ADDRESS IS UNKNOWN

The Agency will take no action during the certification period when the household's address is unknown and mail directed to it (including initial approval notices) has been returned by the post office indicating no known forwarding address. This information should be filed in the case record and will be acted on at the next mandatory rebudget of the case as provided in **Section 15.4, Interim Changes For Simplified Reporting Households**.

Chapter 17

Chapter 17 Recertification of SNAP Households

17.1 RECERTIFICATION PROCESS

SNAP benefits are time limited. No household may participate beyond the expiration of the certification period without a determination of eligibility for a new certification period. The Agency must notify households of expiration dates, provide a recertification application form, complete an interview (telephone or face to face), at least once a year, and recertify eligible households prior to the expiration of certification periods. Households must apply for recertification and comply with interview and verification requirements.

(1) Notice of expiration (NOE)

The Agency will provide households certified for one month or certified in the second month of a two-month certification period a notice of expiration (NOE) at the time of certification. The Agency will provide other households the NOE before the first day of the last month of the certification period, but not before the first day of the next-to-the-last month. The NOE must contain the following:

(A) The date the certification period expires;
(B) The date by which a household must submit an application for recertification in order to receive uninterrupted benefits;
(C) The consequences of failure to apply for recertification in a timely manner;
(D) Notice of the right to receive an application form upon request and to have it accepted as long as it contains a signature and a legible name and address;
(E) Information on alternative submission methods available to households which cannot come into the certification office or do not have an authorized representative and how to exercise these options;
(F) The address of the office where the application must be filed;
(G) The household's right to request a fair hearing if the recertification is denied or if the household objects to the benefit issuance;
(H) Notice that any household consisting only of Supplemental Security Income (SSI) applicants or recipients is entitled to apply for SNAP recertification at an office of the Social Security Administration (SSA);

(I) Notice that failure to participate in an interview may result in delay or denial of benefits; and
(J) Notice that the household is responsible for rescheduling a missed interview and for providing required verification information.

To expedite the recertification process, the Agency will mail a recertification form, an interview notification that allows for either Face to face or telephone interviews, and a statement of needed verification with the NOE.

(2) Recertification Application

The Agency will mail an application to be used by households when applying for recertification. This recertification form is the DSS Form 3807A, Annual Recertification Form, for annual recertifications to be completed at 12 months and the DSS Form 3807A, Six Month Recertification Form, for recertifications to be completed at other 6 month intervals. A new household signature is required at the time of application for recertification. The recertification process can be used for:

(A) Households which apply for recertification prior to the end of their certification period **AND**

(B) Households which file an application within 30 days after the end of the certification period. Thirty days is defined as a calendar month.

The recertification process must elicit from the household sufficient information that, when added to information already contained in the case file, will ensure an accurate determination of eligibility and benefits.

17.2 RECERTIFICATION INTERVIEW

At least one interview (face-to-face or telephone) must be conducted for each household once every 12 months, unless the household receives a 24 month certification period because all adult members are elderly or disabled with no earned income. Households certified for 24 months will receive a mailed system generated form, DSS-3808, Interim Contact Form, at 12 months.

The Agency cannot require the household to complete an interview before the last month of the current certification period. The interview must be conducted on or after the date the application is timely filed. If the interview is scheduled before the last month of the certification period, the household may not be denied for failing to appear for the interview prior to the end of the certification period. If a household misses its interview and requests another interview, the Agency must schedule an interview.

The Agency must make sufficient effort to complete the interview so that the household has at least 10 days after the interview in which to provide verification before the certification period expires.

EXCEPTION: ***This does not apply to BGs which file an application within 30 days after the end of the certification period.***

The Agency must notify the household which has filed an application for recertification when an initial interview to determine eligibility is missed by the household or the household's designated authorized representative. This notification will communicate to the household that they are responsible for rescheduling missed interviews. The Agency will not initiate additional action beyond this notification requirement unless the applicant requests another interview.

Procedure:

All initial applications, reapplications, and annual recertifications must be registered in CHIP. Upon registration, a system generated notice will be sent to the client advising the client to call the Interview Center for a telephone interview. A date set ten days out from the registration date will be automatically entered on CHIP screen INRD in the INTERVIEW DATE field. When the client calls the Interview Center, the interviewer should conduct the interview and acknowledge the completion of the interview by coding CHIP Screen INRD with a "Y" in the interview completed field and updating the INTERVIEW DATE field with the actual date that the interview was completed. If the client does not call the Interview Center within ten days or if the interview is not acknowledged with a "Y" in the INTERVIEW COMPLETED field on INRD by the tenth day, a Notice of Missed Interview (NOMI) will be sent to the client.

17.3 PROCESSING APPLICATIONS FOR RECERTIFICATIONS

(1) Timely Recertification

A timely application for recertification is an application received by the 15th day of the last month of the current certification period. If the 15th falls on a holiday or weekend, the application for recertification is due on the last working day prior to the holiday or weekend.

The household must be notified of the approval or denial by the end of the household's current certification; however, the application cannot be denied for failure to provide information before the certification period expires. If the end of the month falls on a holiday or weekend, requested information must be received by close of business on the last working day of the month.

The household's recertification application may be denied at the end of the current certification period. However, the household is allowed the 30 days after the end of the certification period to complete the recertification process and have its application treated as an application for recertification. If the household takes the required action after denial but within the calendar month after the end of the certification period, the Agency will reopen the case and prorate benefits from the date the household takes the required action.

Note: ***The required actions include submitting a signed recertification application form, completing the interview, and providing verification, if requested.***

For more detailed information and examples, see **SNAP Tool Kit** **Attachment 5: SNAP Annual Recertification Chart** **and** **Attachment 6: SNAP Six Month Recertification Chart.**

(2) Untimely Recertification

An application for recertification received after the 15th of the month of the current certification, but before the current certification ends is considered untimely.

For an application received after the 15th of the month of the current certification, but before the current certification ends, the following must be adhered to:

- The household loses its right to uninterrupted benefits.
- The household has 30 days after the end of the certification period to complete the recertification process and have its application treated as an application for recertification. Thirty days is defined as a calendar month.
- If the household takes the required action before the end of the certification period, the Agency must process the application and provide a full month's benefits for the initial month of the new certification period.
- If the household takes the required action after the end of the certification period but within 30 days of the date of the application for recertification, the Agency must process the application and provide a full month's benefits for the initial month of the new certification period.
- For applications for recertification filed after the 15th of the last month of the certification period but prior to the end of the certification period where the household does not take the required action within 30 days, the application must be denied. However, if the household takes the required action after denial but within the calendar month after the end of the certification period, the Agency will reopen the case and prorate benefits from the date the household takes the required action.

Note: The required actions include submitting a signed recertification application form, completing the interview, and providing verification, if requested.

EXCEPTION: ***If the Agency is at fault for delaying the household's recertification application beyond the first of the month of what would have been its new certification period, the household's benefits will be prorated based on the date of the new application and restored benefits will be provided back to the date the household's certification period should have begun had there been no error and the household been able to apply timely.***

For more detailed information and examples, see **SNAP Tool Kit** **Attachment 5: SNAP Annual Recertification Chart** **and** **Attachment 6: SNAP Six Month Recertification Chart.**

(3) Late Recertification

An application for recertification received after the current certification period ends but within the calendar month after the end of the certification period is considered late.

For an application received after the current certification period ends but within the calendar month after the end of the certification, the following must be adhered to:

- The household loses its right to uninterrupted benefits.
- The application is entitled to expedited treatment if the expedited criteria are met.
- Benefits are prorated from the date the recertification application is filed.

EXCEPTION: ***If the Agency is at fault for delaying the household's recertification application beyond the first of the month of what would have been its new certification period, the household's benefits will be prorated based on the date of the new application and restored benefits will be provided back to the date the household's certification period should have begun had there been no error and the household been able to apply timely***

- The household must be given the opportunity to participate as soon as possible but no later than 30 days after the application is filed. If the recertification process is not completed within 30 days, a notice of denial is sent to the household. Policy relating to second 30 days does not apply in this case.

For more detailed information and examples, see **SNAP Tool Kit** **Attachment 5: SNAP Annual Recertification Chart** **and** **Attachment 6: SNAP Six Month Recertification Chart.**

17.4 AGENCY FAILURE TO PROVIDE AN OPPORTUNITY TO PARTICIPATE AT RECERTIFICATION

Failure of the Agency to provide any eligible household which filed an application for recertification the opportunity to participate in the month following the expiration of its current certification entitles the household to a restoration of lost benefits.

If an eligible household files an application for recertification before the end of the certification period and provides all information necessary to determine eligibility, but because of agency fault, the recertification is not processed within 30 days, the household is entitled to a full month's

allotment for the first month of the certification period. Benefits must not be prorated from the approval date.

17.5 PRORATED BENEFITS AT RECERTIFICATION

Any application filed in the month after certification expires is considered an application for recertification and will receive prorated benefits from the date the application is filed. Any application filed in a month later than the above month will be treated as an initial certification and, if approved, benefits will be prorated from the date of application.

Chapter 18 Fair Hearings

18.1 FAIR HEARING DEFINITION

The fair hearing (appeal) is the administrative process to protect the applicant or recipient household's rights to due process of law when an adverse action is proposed or when the household is aggrieved by any action of the Agency which affects the household's participation in the SNAP.

Fair hearing requests involving EBT transactions should be referred to the SCEBT office. SCEBT will prepare the summary, testify and resolve the issues on all EBT transaction hearings.

18.2 TIME FRAMES

The household may request a fair hearing relating to actions which have occurred within the previous 90 days if the household disputes the current level of benefits. The Agency will disseminate the DSS Brochure 2410, Fair Hearings Brochure, and the DSS Form 2633, Request for Fair Hearing, to any household who wishes to appeal an adverse action. The DSS Form 2633 does not have to be completed by the household. The household may request a fair hearing orally. If this situation occurs, the DSS Form 2633 should then be completed by the Agency.

18.3 CONTINUATION OF BENEFITS

(1) Timely request for a fair hearing

If the household requests a fair hearing within the notice of adverse action period and the certification period has not expired, benefits must be continued at the level authorized immediately prior to the notice, unless the household specifically declines the receipt of continued benefits.

The Agency must explain to the household at the time the fair hearing request is made that if the hearing decision supports the change, any benefits received ineligibly pending the decision will be subject to recovery.

(2) Untimely request for a fair hearing

If the household does not request a hearing during the notice of adverse action period, benefits must be reduced or terminated as provided in the notice. If the household later establishes good cause, the Agency must reinstate the benefits to the prior basis.
The Office of Administrative Hearings will notify the Agency to reinstate benefits on fair hearing requests with good cause received by their office.

(3) Reducing or terminating continued benefits

Once continued or reinstated, benefits will be reduced or terminated prior to the receipt of the official hearing decision only when:

(A) The certification period expires. The Household may reapply and may be determined eligible for a new certification period with a benefit amount as determined by the Agency.

(B) A change affecting the household's eligibility or basis of issuance occurs while the hearing decision is pending and the household fails to request a hearing after the subsequent notice of adverse action.

(C) A mass change affecting the household's eligibility or basis of issuance occurs while the hearing decision is pending.

(D) The household, or its representative, withdrew the fair hearing request orally or in writing and did not advise the Agency of its desire to reinstate the fair hearing within 10 days.

18.4 MASS CHANGES

When benefits are reduced or terminated due to a mass change, participation on the prior basis must be reinstated only if the issue being contested is that eligibility or benefits were improperly computed or that a federal law or regulation is being misapplied or misinterpreted by the Agency.

18.5 RESPONSIBILITIES REGARDING THE FAIR HEARING PROCESS

(1) Responsibilities of the Agency's certification worker

The certification worker has the following responsibilities regarding procedures for fair hearings:

(A) Inform the household of fair hearing rights at application or recertification.

(B) Conduct a pre-hearing conference with the household, upon request (verbal or written) for a fair hearing, to discuss the proposed action. The pre-hearing conference may be conducted over the telephone. Any action deemed necessary as a result of this conference must be taken immediately. A fair hearing must still be held unless the household withdraws the hearing

request or the county informs OAH that the case has been resolved and the A/R no longer wants a hearing.

(C) Assist the household in completing and submitting the appeal and preparing the case, if necessary.

(D) Inform the household of any available free legal services including the name, address and phone number of the office.

(E) Explain continued benefits. See **Section 18.3 Continuation of Benefits.**

(F) Forward DSS Form 2633, Request for Fair Hearing, to the Office of Administrative Hearings (OAH) within two working days.

(G) Make the case file available, provided that confidential information, such as names of individuals who have disclosed information about the household without its knowledge or the nature or status of pending criminal prosecutions, is protected from release. If essential to the hearing, this information may be subpoenaed. Provide a free copy to the household of the portions of the case file that are relevant to the hearing.

(H) Request the Office of Administrative Hearings to subpoena documents or witnesses at least 14 days in advance of the hearing. The county office assumes responsibility for any subpoena fees charged unless requested by the household.

(I) Represent the Agency at the hearing (face-to-face or telephone) **AND**

(J) Implement the hearing decision within 10 days of the final decision and notify the household or his/her representative in writing of the action taken.

(2) Responsibilities of the Certification Supervisor

The certification supervisor has the following responsibilities regarding procedures for fair hearings:

(A) Review proposed case action when the household requests a fair hearing to ensure that the issue cannot be resolved without an appeal.
(B) Review the DSS Form 2633, Request for Fair Hearing.
(C) Ensure that the pre-hearing conference is scheduled.
(D) Participate in the pre-hearing conference with the household and resolve the appealed issue, if possible.
(E) Attend the fair hearing and participate as necessary to ensure that relevant evidence and testimony are presented **AND**
(F) Ensure that appropriate action is taken timely to implement the decision.

(3) Responsibilities of the SNAP Household

The household has the following responsibilities relating to the fair hearing process:

(A) File the appeal request, either orally or in writing, which must indicate the reason the household is dissatisfied. The certification worker must ensure that a DSS Form 2633, Request for Fair Hearing, is completed. (The Office of Administrative Hearings can request that the claimant be more specific about the issue). An oral request may be made by telephoning the certification worker or certification supervisor or the Office of Administrative Hearings.

The request must include any documentation the household wishes to present at the hearing. When the action the household wishes to appeal is not clear, the certification worker or certification supervisor must ask the household to clarify the request; however, forwarding the request to the Office of Administrative Hearings must not be delayed beyond two working days after receipt of the request.

(B) Decide if the household wants to receive continued benefits.
(C) Decide between a face-to-face hearing and a telephone hearing. If neither option is chosen, a telephone hearing will be scheduled. Also, if the hearing officer decides that a face-to-face hearing is necessary, one will be scheduled.
(D) Present the household's case or appoint a representative to present the case **AND**
(E) Request the Office of Administrative Hearings to subpoena any necessary documents or witnesses at least 14 days in advance of the hearing. When the household requests a subpoena, the household automatically accepts responsibility for all subpoena fees charged.

18.6 DENIAL/DISMISSAL OF FAIR HEARING REQUESTS

The certification worker or certification supervisor cannot deny or dismiss a hearing request; however, the hearing officer may do so if any of the following situations occur:

(A) The request is not received in the specified time period. See **Section 18.2 Time Frames**.
(B) The request is withdrawn orally or in writing from the household or representative. A written withdrawal must be signed by the household or the household's representative. All withdrawals must also be forwarded to the Office of Administrative Hearings and be acknowledged as withdrawn by the Office of Administrative Hearings. The certification worker or certification supervisor must not coerce or attempt to influence the household to withdraw the fair hearing request.

The Office of Administrative Hearings must send a written notice (order to dismiss) to the household within 10 days of the withdrawal request to confirm the withdrawal request and to provide the household with an opportunity to request a hearing.

The notice must advise the household that it has 10 days from the date it receives the notice to inform the certification worker or certification supervisor that the household wishes to reinstate the hearing.

If the household timely informs the certification worker or certification supervisor or the Office of Administrative Hearings that he/she wishes to reinstate the hearing, the fair hearing must be held.

The 60 day time frame in **Section 18.12 Fair Hearing Decision (3) Time frames** will begin with the date the household notifies the certification worker or certification supervisor that the household wishes to continue the fair hearing process. The certification worker or certification supervisor or the Office of Administrative Hearings must reinstate a fair hearing as requested by the household at least once. The fair hearing request must not be denied if the household is aggrieved by action that differs from the reinstated action.

(C) The household or the household's representative fails without good cause to appear at the scheduled hearing.

18.7 FAIR HEARING SUMMARY

The certification worker or certification supervisor must attach any supporting documentation with the DSS Form 2633, Request for Fair Hearing, to describe the events leading to and including the action that is in question.

The following basic information must be included in the fair hearing summary. The pages of the summary should be numbered to aid in locating information referenced in the hearing.

(A) Case name, case number and name of the certification worker
(B) Benefit type, date of application and amount of over-issuance or under-issuance
(C) Date of the notice of adverse action and dates of the questioned eligibility period
(D) Logical, concise explanation of the county action
(E) Statement clarifying if continued benefits were authorized or declined
(F) Supporting documentation substantiating case action (e.g., notice, CHIP budget screens, etc.).

The certification worker or certification supervisor must forward a copy of the fair hearing summary to the household when the hearing is scheduled.

18.8 SCHEDULING THE FAIR HEARING

Within 10 days after receiving a fair hearing request, the Office of Administrative Hearings will notify the household in writing of:

- The date, time and place for a face-to-face hearing
- The date and time for a telephone hearing
- The household's rights and responsibilities relating to the hearing and a pamphlet explaining the administrative hearing process.

A copy of the notification will also be sent by the Office of Administrative Hearings at the same time to the certification worker, certification supervisor and the County Director in the residence county as well as the county where the action was taken**.**

If the household is unable to participate at the scheduled time, alternate arrangements may be made. The household may request less advance notice if an earlier hearing date is desired.

18.9 FAIR HEARING PROCEDURES

(1) Fair Hearing Procedures for Regionalized Specialized Workload (RSW)

The client will always be given the option for a face-to-face hearing in the residence county. The worker who took the action will always represent the Department (Agency) by telephone. The pre-hearing contact will be made by the county in which the worker who took the action is housed.

Exception*: Actions that are system generated while the case is in Universal Caseload will be handled by the county of residence.*

If a face-to-face hearing is requested, the client will report to his/her county of residence, a SNAP or FI supervisor in the county of residence will be present and the worker who took the action will call in.

If a video conference hearing is scheduled, the client will report to his/her county of residence, the hearing officer will remain in Columbia and the worker who took the action, if appropriate, will go to the DSS office for video-conferencing, if available. If the worker is in a county where video conferencing is not available, the worker must call the Appeal's office and they will connect the worker by phone to the video-conference room. The eligibility supervisor (or designee) in the client's county of residence must be present at the hearing with the client.

If a telephone hearing takes place, the worker will call the hearing officer and the worker and hearing officer will call the client together. **See Section 18.10 Telephone Fair Hearings** for additional responsibilities for a telephone hearing.

If the worker who took the action isn't at work or available for the hearing, then the supervisor or designee must represent the agency.

(2) Responsibilities of the hearing officer during a hearing

The responsibilities of the hearing officer during a hearing are as follows:

(A) Regulate the course of the hearing and the conduct of the parties and their counsel consistent with due process to ensure an orderly hearing. \
(B) Administer oaths or affirmation.
(C) Rule on offers of proof and the admissibility of evidence.
(D) Request, receive and make part of the record all evidence determined necessary to decide the issues being raised.
(E) Rule on procedural and substantive motions and objections.
(F) Call, examine, sequester, and/or disqualify witnesses.
(G) Allow each party to question or refute any testimony or evidence.
(H) Conclude the hearing when satisfied that all pertinent information bearing on the issue has been introduced and examined.

(3) Responsibilities of the certification worker or certification supervisor

Responsibilities of the certification worker or certification supervisor during a hearing are as follows:

(A) Arrange for any witnesses to be present at the hearing.
(B) Notify and arrange for appropriate agency staff to testify when needed.
(C) If a telephone hearing is scheduled, call the OAH at the time set.
(D) Read prepared summary of circumstances leading up to the hearing.
(E) Testify and present evidence to substantiate action taken adversely against the household.
(F) Question the household and/or witnesses **AND**
(G) Refute any evidence or testimony presented by the household.

(4) Responsibilities of the household

Responsibilities of the household during a hearing are as follows:

(A) Present the household's case or appoint a representative to present the case.
(B) Testify and present evidence to substantiate the case; bring witnesses.
(C) Question the witnesses.
(D) Examine all evidence relied upon by the county in reaching its adverse action decision **AND**
(E) Refute any evidence or testimony presented by the certification worker or certification supervisor.

18.10 TELEPHONE FAIR HEARINGS

(1) Additional responsibilities of the hearing officer for a telephone hearing

Additional responsibilities of the hearing officer for a telephone hearing are as follows:

(A) Conduct the conference call with the household after the certification worker or certification supervisor calls OAH **AND**
(B) Decide during the hearing, if necessary, to continue the hearing by requiring a face-to-face hearing.

(2) Additional responsibilities of the certification worker or certification supervisor for a telephone hearing

Additional responsibilities of the certification worker or certification supervisor for a telephone hearing are as follows:

(A) Call the Office of Administrative Hearings at the scheduled time **AND**
(B) Call the Office of Administrative Hearings 15 minutes later if the household cannot be contacted.

(3) Additional responsibilities of the household for a telephone hearing

Additional responsibilities of the household for a telephone hearing are as follows:

(A) Be available at the scheduled time at the telephone number given for the hearing **AND**
(B) Arrange for any witnesses to be present at the scheduled time.

18.11 EVIDENCE APPLICABLE IN A FAIR HEARING

The burden of proof in a fair hearing generally falls on the certification worker or certification supervisor. The following chart describes the types of evidence which may be presented in a fair hearing:

Type of Evidence	Definition
Best	**Original or primary evidence (i.e., eye witness, receipts, wage stubs, canceled checks, etc.); evidence that is the most reliable and direct in relationship to what is offered to prove.**
Substantial	**Evidence that creates more than a mere suspicion and that a reasonable person would find sufficient to support a conclusion.**
Hearsay	**Secondhand information, usually a statement made out of court and not under oath and offers in evidence as proof that what is stated is true. Hearsay evidence is generally not admissible.** ***EXCEPTIONS:*** • ***Prior statements made by a party to the hearing are admissible if they are against the party's interest.***

	• ***Records kept in the course of a regular activity may be admissible.***
Irrelevant	**Evidence which does not have a direct bearing on the issue; does not tend to prove or disprove any issue of fact that is of consequence to the case.**

18.12 FAIR HEARING DECISION

(1) Fair Hearing Committee

The Fair Hearing Committee has the final decision making power in fair hearings. The committee has the responsibility of reviewing the hearing record provided by the Office of Administrative Hearings before making the final decision. Decisions of the Fair Hearing Committee must comply with federal law and regulations and must be based on the hearing record. The decision is binding on the county office and must be retained in the case file for three years.

(2) Notification

The household and the certification worker, certification supervisor and the County Director in the residence county as well as the county where the action was taken, must each be notified in writing of:

(A) The Fair Hearing Committee's decision
(B) The reasons for the decision
(C) The available appeal rights

(3) Time Frames

The household must be informed of the decision by the Fair Hearing Committee within 60 days of the initial request for a fair hearing by the household.
The Agency must effectuate any change in benefits within 10 days of receiving the final decision. In the event of an over-issuance, the certification worker must establish a claim against the household.

(4) Motion for Reconsideration

Any party (county or household) aggrieved by a final fair hearing decision may, within 10 days of the service of the order, file a written Motion for Reconsideration, which shall specify in detail the grounds for relief sought and supporting authorities.
The Motion for Reconsideration is a written explanation of the reason that the party disagrees with the hearing decision and any supporting evidence for this. There is no formal format for this. The Office of Administrative Hearings may order reconsideration on its own motion within 10 days after the service of the final order. The service of order is the date the fair hearing decision is received by the county or the household.

The filing of a motion for reconsideration will not suspend or delay the effective date of the order, and the order will take effect on the date fixed by the Office of Administrative Hearings and will

continue in effect unless the motion is granted or until the order is super-ceded, modified, or set aside as provided by law.

A Motion for Reconsideration will only be granted on the basis of:

(A) A material error of law
(B) A material error of fact
(C) The discovery of new evidence sufficiently strong to reverse or modify the order, which could not have been previously discovered by due diligence.

The Office of Administrative Hearings may order a rehearing or enter an order with reference to the motion without ordering a hearing, and shall dispose of the motion within 30 days after it is filed. If the Office of Administrative Hearings determines, in its discretion, that a rehearing is necessary, the matter shall be set for further proceedings as soon as practical.

If after such rehearing, it appears that the original decision, order, or determination is in any respect unlawful or unreasonable, the hearing officer/committee may reverse, change, modify, or suspend the same accordingly.

Any decision, order, or determination made after such reconsideration, reversal, change, modification, or suspension of the original determination shall have the same force and effect as the original decision, order, or determination.

18.13 RIGHT TO APPEAL THE HEARING DECISION

In addition to a Motion for Reconsideration, the household has the right to appeal an adverse decision of the Fair Hearing Committee to the Administrative Law Court for judicial review. This must be initiated within 30 days of the decision of the Fair Hearing Committee.

Chapter

19

Chapter 19 Federal Demonstration Projects

19.1 DEFINITION OF THE SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP)

The South Carolina Combined Application Project (SCCAP) is a cooperative effort between SCDSS, the USDA Food and Nutrition Service (FNS) and the SSA. This federally approved demonstration project is designed to simplify the application process for the SSI applicant who chooses to apply for SNAP benefits.

To be determined a SCCAP household the SSI applicant must meet the following requirements:

(A) The applicant is an SSI eligible individual.
(B) The applicant has no earned income.
(C) The applicant lives alone, or purchases and prepares meals separately if living with others.

A SCCAP participant will receive a standard amount of SNAP benefits based on a monthly representative income consistent with the SSI federal benefit rate for SSI only ($733) or for a combination of SSI and other income (other than earned) ($753) and one of 2 standard shelter/utility deductions representative of expenses paid by the individual. The “shelter low” deduction is given when actual expenses are $0 - $290. The “shelter high” deduction is given when actual expenses are $291- $443. Standard SCCAP benefit amounts are shown below:

If income is $733– with “shelter low” deduction: $20

If income is $733 – with “shelter high” deduction: $66

If income is $753– with “shelter low” deduction: $16

If income is $753 – with “shelter high” deduction: $57

An individual meeting the SCCAP definition may be excluded from SCCAP and participate in the regular SNAP Program if one of the following can be verified by the applicant:

- shelter and utility expenses in excess of the higher standard (over $443 per month)
- out-of-pocket medical expenses in excess of $50
- paying legally obligated child support to someone outside of the household

19.2 ELIGIBILITY DETERMINATION FOR THE SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP)

SCCAP eligibility and allotment levels are automatically determined based on household information transferred from the SDX. Processing of a SCCAP participant is achieved without SNAP county office involvement, except in special situations.

Households that meet resource eligibility for SSI are considered to have met resource eligibility for SNAP. These recipients are also exempt from SNAP Employment and Training (E&T) work requirements.

SDX information is used to make the SCCAP determination. To be determined a SCCAP BG:

(A) The pay status code on SDX must be C01, E01, M01, or M02
(B) The marital status (TMR field) must be coded either AI (aged individual), BI (blind individual), or DI (disabled individual) which indicates they are not married.
(C) The federal living arrangement code must read A
(D) The individual must not have earned income
(E) The gross amount must equal the appropriate federal benefit rate with a frequency code of C.
Note: The certification worker should use the SDX field “GRO” when determining SCCAP eligibility in addition to any other unearned income in a current pay status and in-kind income).

A BG meeting these criteria is coded "Y" on the SCCAP indicator on CHIP screen INRD.

If an SSI recipient meets SCCAP definition, he/she may only receive SNAP benefits through SCCAP.

Eligibility for benefits for SCCAP "Y" begins on the date of application (prorated month) when the SCCAP "Y" application is received from a source other than SSA, (e.g., local county DSS offices, internet and direct mail-ins), if these applicants are receiving SSI at the time application is made for SCCAP.

19.3 PROCESSING HOUSEHOLDS ELIGIBLE FOR THE SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP)

For households that meet SCCAP definition, the local county office will:

(A) Distribute the SCCAP Brochure, DSS-3352.
(B) Have the recipient sign the DSS-1205, Declaration and Consent Form. If the DSS-1205, Declaration and Consent Form, needs to be mailed to the client, it should be accompanied with a DSS-12 04, Cover Letter, and the DSS-3352, SCCAP Brochure. A return envelope should also be included. **AND**
(C) Fax/mail the DSS-1205, Declaration and Consent Form to the following address:

SCCAP Unit
Division of Family Assistance
P.O. Box 100229
Columbia, SC 29202-3229

The SCCAP fax number is (803) 898-7141.

Counties should not register a case in CHIP for a SCCAP "Y" case. This is done at the State Office only.

19.4 EXCEPTION TO SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP) ELIGIBILITY

Households may be excluded from meeting SCCAP definition if any of the following occurs:

- Out-of-pocket medical expenses incurred by the individual exceed the monthly average of $50.
- Combined actual shelter and utility expenses incurred by the individual exceed the higher of the SCCAP standard shelter/utility deduction.
- The household is paying legally obligated child support to someone outside of the home and is eligible for this deduction. **(See 12.7 Child Support Deduction)**

If one of these situations exists, the individual will be instructed to apply for SNAP benefits at the local county office.

The household must provide verification of out-of-pocket ~~excess~~ medical expenses that exceed the monthly average of $50 or combined shelter and utility expenses that exceed the higher of the SCCAP standard shelter/utility deduction. A SCCAP household that verifies excess shelter or medical expenses may elect to receive the mandatory utility allowance (MUA) or the basic utility

allowance (BUA) instead of the actual utility deduction. A SCCAP household that verifies excess shelter expenses is processed by the rules of the regular SNAP. These households are coded "E" in the SCCAP indicator field on CHIP screen INRD to show that they are excluded" from SCCAP.

For households that meet SCCAP definition but are excluded from SCCAP because they have verified excess expenses, the certification worker will:

- Have the recipient complete a DSS Form 3800, Application for Family Independence, Food Stamps and Other DSS Assistance
- Verify SSI income
- Verify expenses **AND**
- Assign appropriate certification period. The SCCAP indicator on CHIP screen INRD must be "E".

19.5 SSA PROCEDURES FOR THE SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP)

An applicant for SSI will be screened for SCCAP eligibility by SSA. If this screening indicates possible eligibility, SSA will explain SCCAP to the applicant. The SSI application includes the option to receive SNAP benefits through SCCAP or to not receive SNAP benefits. If an SSI recipient meets SCCAP definition, he/she may only receive SNAP benefits through SCCAP. The SSA worker enters appropriate codes on the SDX to indicate that the individual wishes to participate in the SCCAP project. This information is transferred to the SCCAP Unit for appropriate action. The SSA worker provides an explanation of benefit amounts and delivery methods.

SSA will also inform the applicant that if he/she has shelter/utility expenses in excess of the SCCAP standard shelter/utility deductions or out-of-pocket medical expenses in excess of $50, he/she may apply at the local county office to receive benefits under the regular SNAP.

Additionally, SSA will inform the applicant that he/she may receive SNAP benefits while the SSI determination is being processed by applying at the local county DSS office.

Eligibility for benefits for SCCAP "Y" households begins the month following SSI eligibility determination or the month following application date where SSI is already being received. These households are not entitled to prorated or retroactive benefits; therefore, SSA will instruct the applicant to apply at the local DSS office if he/she wishes to receive SNAP benefits in the interim.

19.6 RESPONSIBILITY FOR SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP) HOUSEHOLDS

Once SSI/SCCAP eligibility is determined, State Office assumes full responsibility of the case unless the household can verify deductions in excess of the standard. Eligibility for SNAP benefits through SCCAP continues as long as the household is SSI eligible. When SSA re-determines eligibility for SSI benefits, the household will be screened for continued SCCAP eligibility. All changes will be reported to SSA and picked up by CHIP through the transfer of SDX information monthly.

Since addresses for SCCAP households must agree with the SDX address information, no changes can be made to CHIP screen ADDR until the same change is reflected on the SDX, except when the address on SDX is that of a representative payee. An SSI recipient who lives in South Carolina but changes addresses within South Carolina is still eligible for SCCAP and the address change will be corrected from the SDX.

County offices should only forward returned mail on SCCAP BGs to State Office if the returned mail indicates that the individual is deceased or has moved out of state. County offices should make no change to an SCCAP "Y" case.

19.7 SSI DENIAL

If the SSI application is denied, the individual will need to apply for SNAP benefits at the local county DSS office under the regular SNAP rules.

19.8 CHANGES IN SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP) HOUSEHOLDS

Changes in SCCAP "Y" cases are reported to SSA and processed by the SCCAP Unit at State Office.

(1) Regular SNAP household that becomes SCCAP "Y"

If the household reports a change in circumstances which would cause a regular SNAP case to become a SCCAP "Y", case closure is not necessary. The local county DSS office will:

(A) Distribute the SCCAP brochure, DSS-3352
(B) Have the recipient sign the Declaration and Consent Form, DSS-1205 **AND**
(C) Fax/mail the declaration and consent form to:

SCCAP Unit
Division of Family Assistance
P.O. Box 100229

Columbia, SC 29202-3229

The SCCAP fax number is (803) 898-7141.

Appropriate action will be taken by State Office to convert the case to SCCAP "Y".

(2) SCCAP household reports a change in circumstances which would cause the case to be excluded from SCCAP

If the household reports a change in circumstances which would cause the case to be excluded from SCCAP, the local county DSS office must take the following action:

(A) Request verification of expenses, child support, earned income, etc. via the DSS-1669, Request for Information, or CHIP notice C000, Additional Information Requested. Allow the household 10 days to provide requested verification.
(B) Upon receipt of requested information, determine eligibility for the regular SNAP **AND**
(C) If not eligible for excess shelter/utility expenses or out-of-pocket medical expenses, notify the household in writing and leave the case open as a SCCAP "Y" case **OR**
(D) If the individual is determined eligible for the regular SNAP and excluded from SCCAP:

- Have a new application, DSS-3800, signed by the household
- Contact SCCAP Unit to close the SCCAP case
- Register a reapplication for the regular SNAP in CHIP
- Change the SCCAP indicator on CHIP screen INRD to "E" and update appropriate CHIP screens with the new information
- Authorize benefits for the appropriate month and assign the appropriate certification period **AND**
- Notify the household of the new benefit amount.

19.9 RECIPIENT CLAIMS FOR SOUTH CAROLINA COMBINED APPLICATION PROJECT (SCCAP) HOUSEHOLDS

Regulations concerning categorical eligibility are followed in the event that there is a recipient claim on a SCCAP case. Claims referrals on any SCCAP case are to be forwarded to the SCCAP Unit at State Office.

19.10 DEFINITION OF THE ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP)

The South Carolina Elderly Simplified Application Project (ESAP) is designed to reinvent the SNAP process for elderly households who have traditionally proven to be our most stable

population, on fixed income, with few reportable changes in household composition or deductions.

This segment of our population faces barriers to participation in the SNAP due to the complexity of the application process and problems associated with age, such as transportation, mobility and disability.

In addition, this project is consistent with the SNAP goal of providing food assistance to raise levels of nutrition among low-income individuals and to better serve the nutritional needs of elderly individuals.

The ESAP is handled by the ESAP Unit, centralized at State Office, who processes all applications, continuing eligibility and maintenance functions for this caseload.

19.11 ELIGIBILITY FOR THE ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP)

To be determined an ESAP household; the household must meet the following requirements:

(A) All household members are elderly (age 60 or older)
(B) The household has no earned income.
(C) No member of the household receives SNAP benefits under the South Carolina Combined Application Project (SCCAP). Households mandatory for SCCAP cannot participate in ESAP. Households that meet the definition for SCAAP but participate in the regular SNAP under SCCAP E must participate in ESAP if they meet ESAP eligibility.

ESAP eligibility will be determined based on information on the application and any information from state and federal computer matches. The household will not have to verify any additional information, unless questionable, to determine eligibility. If information regarding non-citizen status is needed, the household must provide this verification. In addition, any information that is not verified through state and federal computer matches (SDX, BENDEX, IEVS, etc.) may be considered questionable and require additional verification on the part of the household.

ESAP benefits will be calculated the same as for any regular SNAP household. For all households whose eligibility is determined under ESAP, the ESAP indicator on CHIP screen INRD will be coded "Y".

Notification of FS eligibility is accomplished through CHIP by the ESAP Unit for the new ESAP cases. Notices will include the amount of benefits, the effective month of eligibility and instructions regarding the receipt and use of the EBT card.

19.12 PROCESSING HOUSEHOLDS ELIGIBLE FOR THE ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP)

The following describes the procedures under which ESAP will operate.

Upon application, the local county DSS office or outreach providers will determine whether all household members meet the ESAP definition described in Section **19.11 Eligibility for the Elderly Simplified Application Project (ESAP)**. For cases that meet the ESAP definition, the local county DSS office or outreach providers must:

(A) Distribute the DSS-16178, ESAP Brochure, DSS-16177, ESAP Cover Letter, and DSS-3800A, "Your Rights and Responsibilities."
(B) Provide information and referrals to various other agencies, organizations, and community/county resources that could be of benefit to the household by distributing the DSS 24126, SC Family Independence.
(C) Have the household complete the DSS-16176, ESAP Application. The household will not be required to complete an interview to determine eligibility. However, if the household does request an interview, one must be granted and conducted by the local county DSS office in which the household makes application. The local county DSS office will use the DSS-16176, ESAP Application**.** The completion of this application will require the household to self-declare all needed information regarding eligibility.
(D) Mail/fax the DSS 16176 to:

ESAP Unit
P.O. Box 100229
Columbia, SC 29202-3229

The ESAP Fax Number is (803) 898-7141.

Counties should not register a case in CHIP for an ESAP case. This is done at the State Office only.

19.13 DETERMINING CONTINUED ELIGIBILITY FOR ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP) HOUSEHOLDS

ESAP households will be mailed a DSS Form3808, Interim Contact Form on an annual basis. The household must complete this form to continue SNAP participation. This form will be returned by the household to the centralized ESAP Unit.

The DSS-3808 requests information regarding address, residence, income and any anticipated changes. The information requested is sufficient that, when added to information already

contained in the case file, will ensure an accurate determination of eligibility and benefits. The ESAP worker will evaluate this information, make any needed change, and determine continued eligibility based on this information.

Failure to return a completed DSS Form 3808 will be acknowledged by CHIP and will result in a system generated case closure.

19.14 CHANGES IN ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP) HOUSEHOLDS

ESAP households are subject to simplified reporting requirements as defined in **Section 15.3 Simplified Reporting Households (1) *Annual (12 month) reporting households***. Interim changes will be handled according to **Section 15.4 Interim Changes for Simplified Reporting Households**.

The ESAP worker must send proper notification regarding the effect of any change on the benefit amount based on regular SNAP regulations.

In situations where the ESAP household composition changes and all members are no longer elderly with any earned income, the household must be removed from ESAP and must reapply for SNAP participation through the regular SNAP.

19.15 RECIPIENT CLAIMS FOR ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP) HOUSEHOLDS

Any possible recipient claim detected in an ESAP case will be forwarded on a DSS-1680, Possible Claims Referral Form, to the appropriate Recipient Claims Supervisor for the county in which the ESAP household resides. This referral will be processed by standard recipient claims policy for the SNAP.

Chapter

20

Chapter 20 Disqualification for Intentional Program Violation (IPV)

20.1 ADMINISTRATIVE RESPONSIBILITY

The Agency will be responsible for investigating any case of alleged intentional Program violation (IPV), and ensuring that appropriate cases are acted upon either through administrative disqualification hearings or referral to a court of appropriate jurisdiction in accordance with the procedures outlined in this section. Administrative disqualification procedures or referral for prosecution action should be initiated by the Agency in cases in which the Agency has sufficient documentary evidence to substantiate that an individual has intentionally made one or more acts of intentional Program violation as defined in **Section 20.2 Definition of Intentional Program Violation (IPV).** The Agency will conduct administrative disqualification hearings (ADH's) (See **Section 20.3 Methods of Determination of an Intentional Program Violation**) in cases in which the Agency believes the facts of the individual case do not warrant civil or criminal prosecution through the appropriate court system, in cases previously referred for prosecution that were declined by the appropriate legal authority, and in previously referred cases where no action was taken within a reasonable period of time and the referral was formally withdrawn by the Agency.

The Agency will not initiate an administrative disqualification hearing against an accused individual whose case is currently being referred for prosecution or subsequent to any action taken against the accused individual by the prosecutor or court of appropriate jurisdiction, if the factual issues of the case arise out of the same, or related, circumstances.

The Agency may initiate administrative disqualification procedures or refer a case for prosecution regardless of the current eligibility of the individual.

If the Agency does not initiate administrative disqualification procedures or refer for prosecution a case involving an over-issuance caused by a suspected act of IPV, the Agency will take action to collect the over-issuance by establishing an inadvertent household error recipient claim against the household in accordance with **Section 23.3 Classification of Recipient Claims (2) *Inadvertent household error***. The collection of the overpayment and the disqualification for IPV are separate issues.

The State agency shall base administrative disqualifications for intentional Program violations on the determinations of hearing authorities arrived at through administrative disqualification hearings or on determinations reached by courts of appropriate jurisdiction.

However, the Agency will allow accused individuals either to waive their rights to administrative disqualification hearings or to sign disqualification consent agreements for cases of deferred adjudication in accordance with **Section 20.3 Methods of Determination of an Intentional Program Violation**. The Agency will base administrative disqualifications for IPV on the waived right to an administrative disqualification hearing or on the signed disqualification consent agreement in cases of deferred adjudication.

20.2 DEFINITION OF INTENTIONAL PROGRAM VIOLATION (IPV)

Intentional Program violations (IPV's) will consist of having intentionally:

(A) Made a false or misleading statement, or misrepresented, concealed or withheld facts; **OR**
(B) Committed any act that constitutes a violation of the Food and Nutrition Act, the SNAP Regulations, or any State statute for the purpose of using, presenting, transferring, acquiring, receiving, possessing or trafficking of SNAP benefits or authorization cards used as part of an automated benefit delivery system (access device).

20.3 METHODS OF DETERMINATION OF AN INTENTIONAL PROGRAM VIOLATION (IPV)

The methods in which a determination of IPV is made against an individual are:

(A) An Administrative Disqualification Hearing (ADH) conducted by the Office of Administrative Hearings.

A pending hearing must not affect the individual's right to be certified and participate in the SNAP. Recipient Claims staff will represent the Agency at this hearing.

(B) An administrative consent agreement (ACA) in which the individual waives the right to an ADH
(C) Court determination or prosecution in a court of law.

20.4 SNAP DISQUALIFICATION FOR AN INTENTIONAL PROGRAM VIOLATION (IPV)

An individual, not a household, who intentionally violates SNAP regulations, must be disqualified from participation.

Recipient Claims staff will be responsible for investigating any case of alleged IPV and ensuring that appropriate cases are acted upon either through administrative disqualification hearings or court referrals. A DSS-2408, Administrative Disqualification Hearings Brochure, should be given to any individual who inquires about the administrative disqualification hearing process.

An individual disqualified for an IPV cannot act as an authorized representative or as a primary informant during the disqualification period. The disqualified person must name another adult member as he primary informant or name an authorized representative. However, if there is not another adult member and the disqualified person has no one he/she can name as an authorized representative, the disqualified individual may serve as the primary informant.

20.5 INTENTIONAL PROGRAM VIOLATION (IPV) DISQUALIFICATION TIME PERIODS

When it is determined that an individual has committed an IPV, that individual will be disqualified the month following the date of decision, whether the individual is participating or not. If the disqualified individual is the only household member, the case must be closed.

A written notice must be sent to the household stating the individual will be disqualified the month following the date of the decision.

An individual, not a household, who has been determined to have committed an IPV in the SNAP, is disqualified from participating in the SNAP for the time periods listed in the chart that follows. No additional BG members may be disqualified unless there is convincing evidence of their complicity in committing the IPV.

When a case is referred to a court for prosecution, the length of the disqualification and the date the disqualification is to begin may be set by the court. If the court fails to impose a disqualification period for any IPV, the appropriate disqualification period shall be imposed unless it is contrary to the court order.

Offense	Time Period
Any IPV or Suspected Fraud (SF)/ Fraud (FR) prior to April 1, 1983. These are considered a first IPV. When the disqualification was imposed prior to April 1, 1983, but was discontinued prior to completion due to the subsequent ineligibility of the BG, consider that disqualification to be completed.	3 months
First offense between April 1, 1983 and September 22, 1996	6 months
First offense after September 22, 1996	12 months
Second offense between April 1, 1983 and September 22, 1996	12 months
Second offense after September 22, 1996	24 months
Third offense	Permanently
First offense of buying illegal drugs with SNAP benefits	2 Years/24 months
Second offense of buying illegal drugs with SNAP benefits	Permanently
First and/or subsequent offense by an individual found to have made a fraudulent statement or representation with respect to the identity or place of residence of the individual in order to receive multiple SNAP/EBT benefits simultaneously	10 years
Conviction(s) by a federal, state, or local court for trafficking benefits of an aggregate amount of $500 or more	Permanently
Conviction(s) of buying or selling firearms, ammunition or explosives with SNAP benefits	Permanently

The disqualification period is ended by adding the disqualified individual(s), if eligible with no deferred disqualification, back to the household effective the month after the disqualification period expires. If the individual has served one disqualification period and subsequently commits a second IPV, the disqualification period would be imposed the month following the date of decision.

Once a disqualification penalty has been imposed against a household member, the disqualification period will continue uninterrupted until completed. An agency error (AG) claim must be established if benefits are over-issued due to failure to impose a disqualification period correctly or timely.

20.6 DISQUALIFIED RECIPIENT SUBSYSTEM (DRS)

If a person has a disqualification imposed for an IPV in one state and moves to another, the remainder of the disqualification must be served in the new state. The national system for tracking IPVs is the Disqualified Recipient Subsystem (DRS).

All IPV disqualifications are entered into DRS. This subsystem must be queried whenever a person makes application/reapplication for participation in the SNAP. SSN's are used in computer matching to indicate if the person is disqualified in another county or state.

(1) Clerical Responsibilities in DRS

The clerical worker performs the following procedures:

(A) Register the new application, reapplication or recertification.
(B) Check the NDQ indicator as shown on CHIP screens CLIS, CLPR or REAP. The NDQ indicator will show a "Y" if the person has a national disqualification.
(C) Notify the SNAP certification worker of the findings.

(2) SNAP certification worker responsibilities in DRS

When the NDQ indicator shows a "Y", the Snap certification worker will check function #3, NDQ Inquiry on CHIP screen INIM. This entry of function #3 will take the worker to the NDQ Inquiry Menu (NDIM). The disqualified individual's SSN must be entered in order to access function #1, NDQ Inquiry (NDIN).

This screen allows inquiry of records on the National Disqualification History file and on update records on the NDIN file that are awaiting transmission to the national system. The Disqualification Decision Date is either the date a decision is rendered by a hearing official in an ADH or a court of law or the date that the individual signed a waiver of the right to an ADH (ACA) or a Deferred Adjudication Disqualification Consent Agreement (DCA).

If the disqualification status is pending, the certification worker will print the NDIN screen and forward it to the appropriate recipient claims staff within 10 days of the date of detection of the pending disqualification. No further action is required if the disqualification has been served.

The certification worker may also use Function #2, National Disqualification Update Record Inquiry (NDUR) on CHIP screen NDIM to inquire on the status of a disqualified individual. The NDUR allows inquiry on the county update records that are awaiting transmission to the national system.

The NDUR screen is county specific but any county's updates can be inquired on. The certification worker cannot certify the household until the disqualification is verified. Verbal verification may be used, but the household member must have the opportunity to respond to this information.

(3) Recipient claims staff responsibilities in DRS

If the household member affirms this information, recipient claims staff should contact the regional NDQ coordinator to have the other state impose the disqualification, but this documentation must still be obtained for evidence. For expedited cases, certification may not be delayed beyond the seven day processing period. If it is verified that the individual should have been disqualified, a claim would be established against the household for any over-issued benefits.

If the household member disputes the verbal information, recipient claims staff must obtain written verification. The certification worker will pend the application and notify the household of this. The Agency may pend the application for 30 days following the date of the initial request of the disqualification information.

Recipient claims staff will impose the disqualification, recalculate the case and alert the certification of the disqualification. Recipient claims staff will use CHIP computer printouts to help identify disqualification time periods.

Chapter

21

Chapter 21 Restoration of Lost Benefits

21.1 ENTITLEMENT

The Agency will restore to households benefits which were lost whenever the loss was caused by an error by the Agency or by an administrative disqualification for intentional Program violation which was subsequently reversed, or if there is a statement elsewhere in the regulations specifically stating that the household is entitled to restoration of lost benefits. Furthermore, unless there is a statement elsewhere in the regulations that a household is entitled to lost benefits for a longer period, benefits will be restored for not more than twelve months prior to whichever of the following occurred first:

- The date the Agency receives a request for restoration from a household; or
- The date the Agency is notified or otherwise discovers that a loss to a household has occurred.

The Agency will restore to households benefits which were found by any judicial action to have been wrongfully withheld. If the judicial action is the first action the recipient has taken to obtain restoration of lost benefits, then benefits will be restored for a period of not more than twelve months from the date the court action was initiated. When the judicial action is a review of the Agency action, the benefits will be restored for a period of not more than twelve months from the first of the following dates:

- The date the Agency receives a request for restoration:
- If no request for restoration is received, the date the fair hearing action was initiated; but
- Never more than one year from when the Agency is notified of, or discovers, the loss.

Benefits shall be restored even if the household is currently ineligible.

21.2 ERRORS DISCOVERED BY THE AGENCY

If the Agency determines that a loss of benefits has occurred, and the household is entitled to restoration of those benefits, the Agency will automatically take action to restore any benefits that were lost. No action by the household is necessary.

However, benefits will not be restored if the benefits were lost more than 12 months prior to the month the loss was discovered by the Agency in the normal course of business, or were lost more than 12 months prior to the month the Agency was notified in writing or orally of a possible loss to a specific household. The Agency will notify the household of its entitlement, the amount of benefits to be restored, any offsetting that was done, the method of restoration, and the right to appeal through the fair hearing process if the household disagrees with any aspect of the proposed lost benefit restoration.

21.3 DISPUTED BENEFITS

If the Agency determines that a household is entitled to restoration of lost benefits, but the household does not agree with the amount to be restored as calculated by the Agency or any other action taken by the Agency to restore lost benefits, the household may request a fair hearing within 90 days of the date the household is notified of its entitlement to restoration of lost benefits. If a fair hearing is requested prior to or during the time lost benefits are being restored, the household will receive the lost benefits as determined by the Agency pending the results of the fair hearing. If the fair hearing decision is favorable to the household, the Agency will restore the lost benefits in accordance with that decision.

If a household believes it is entitled to restoration of lost benefits but the Agency, after reviewing the case file, does not agree, the household has 90 days from the date of the Agency determination to request a fair hearing. The Agency will restore lost benefits to the household only if the fair hearing decision is favorable to the household. Benefits lost more than 12 months prior to the date the Agency was initially informed of the household's possible entitlement to lost benefits will not be restored.

21.4 COMPUTING THE AMOUNT TO BE RESTORED

After correcting the loss for future months and excluding those months for which benefits may have been lost prior to the 12-month time limits described above in **Section 21.2 Errors Discovered by the State** and **Section 21.3 Disputed Benefits**, the Agency will calculate the amount to be restored as follows:

(A) If the household was eligible but received an incorrect allotment, the loss of benefits will be calculated only for those months the household participated. If the loss was caused by an incorrect delay, denial, or termination of benefits, the months affected by the loss will be calculated as follows:

(B) If an eligible household's application was erroneously denied, the month the loss initially occurred will be the month of application, or for an eligible household filing a timely reapplication, the month following the expiration of its certification period.
(C) If an eligible household's application was delayed, the months for which benefits may be lost will be calculated in accordance with **Section 6.6 Delays in Processing Caused by the Agency.**
(D) If a household's benefits were erroneously terminated, the month the loss initially occurred will be the first month benefits were not received as a result of the erroneous action.
(E) After computing the date the loss initially occurred, the loss will be calculated for each month subsequent to that date until either the first month the error is corrected or the first month the household is found ineligible.

For each month affected by the loss, the Agency will determine if the household was actually eligible. In cases where there is no information in the household's case file to document that the household was actually eligible, the Agency will advise the household of what information must be provided to determine eligibility for these months. For each month the household cannot provide the necessary information to demonstrate its eligibility, the household will be considered ineligible.

For the months the household was eligible, the Agency will calculate the allotment the household should have received. If the household received a smaller allotment than it was eligible to receive, the difference between the actual and correct allotments equals the amount to be restored.

If a claim against a household is unpaid or held in suspense (see **Chapter 23 Claims Against Households**), the amount to be restored will be offset against the amount due on the claim before the balance, if any, is restored to the household. At the point in time when the household is certified and receives an initial allotment, the initial allotment will not be reduced to offset claims, even if the initial allotment is paid retroactively.

21.5 LOST BENEFITS TO INDIVIDUALS DISQUALIFIED FOR INTENTIONAL PROGRAM VIOLATION (IPV)

Individuals disqualified for intentional Program violation (IPV) are entitled to restoration of any benefits lost during the months that they were disqualified, not to exceed twelve months prior to the date of Agency notification, only if the decision which resulted in disqualification is subsequently reversed. For each month the individual was disqualified, not to exceed twelve months prior to Agency notification, the amount to be restored, if any, will be determined by comparing the allotment the household received with the allotment the household would have received had the disqualified member been allowed to participate. If the household received a smaller allotment than it should have received, the difference equals the amount to be restored. Participation in an administrative disqualification hearing in which the household contests the Agency assertion of IPV will be considered notification that the household is requesting restored benefits.

21.6 METHOD OF RESTORATION

Regardless of whether a household is currently eligible or ineligible, the Agency will restore lost benefits to a household by issuing an allotment equal to the amount of benefits that were lost. The amount restored will be issued in addition to the allotment currently eligible households are entitled to receive.

The Agency will honor reasonable requests by households to restore lost benefits in monthly installments if, for example, the household fears that the amount to be restored is more than it can use in a reasonable period of time.

21.7 CHANGES IN HOUSEHOLD COMPOSITION

Whenever lost benefits are due a household and the household's membership has changed, the Agency will restore the lost benefits to the household containing a majority of the individuals who were household members at the time the loss occurred. If the Agency cannot locate or determine the household which contains a majority of household members the Agency will restore the lost benefits to the household containing the head of the household at the time the loss occurred.

21.8 ACCOUNTING PROCEDURES

The Agency will be responsible for maintaining an accounting system for documenting a household's entitlement to restoration of lost benefits and for recording the balance of lost benefits that must be restored to the household. The Agency will at a minimum, document how the amount to be restored was calculated and the reason lost benefits must be restored. The CHIP system will identify those situations where a claim against a household can be used to offset the amount to be restored.

Chapter 22 Issuance

Issuance is the distribution of SNAP benefits to certified households within a prescribed time frame.

22.1 METHOD OF ISSUANCE

South Carolina issues SNAP benefits to eligible households through Electronic Benefit Transfer (EBT). EBT allows SNAP recipients to receive their benefits through the use of a plastic magnetic striped EBT card. Benefits are electronically deposited into their EBT account. Food purchases will be debited from the account using the EBT card at Point of Sale (POS) terminals at authorized food retailers. Under normal circumstances, all purchase and balance inquiry transactions require a Personal Identification Number (PIN) to access the account. Benefits are protected once the EBT card is reported lost, damaged or stolen. Recipients receive updated account balance information with each purchase.

An eligible household may allow the following to purchase food for the household:

(A) Any household member
(B) Any authorized representative
(C) Any non-household member. Responsibility for the use of the EBT card by a non-household member when the PIN has been provided by the household remains the responsibility of the household.

22.2 TYPES OF ISSUANCE

Types of SNAP issuance are limited to the following:

(A) Regular monthly benefits
(B) Supplemental benefits
(C) Restoration of lost benefits
(D) Replacement of food purchased with SNAP benefits destroyed in a household misfortune.

22.3 AGENCY RESPONSIBILITIES FOR SNAP ISSUANCE

(1) Application registration clerk responsibilities

The application registration clerk is responsible for identifying the Primary Information (PI) person for the household at application registration. PI designation at the time of the SNAP application is mandatory. The person named PI at registration will be the individual who is responsible for receiving the SNAP benefits for the household. The PI's name will appear on the EBT card. Anytime the PI is changed, access to the case benefits is changed. It is important that the correct individual with his/her name as it appears on the Social Security card is designated as PI at the time of application registration. If the first name on the DSS-3800, Application/Reapplication for FI/FS, and the signature of the person that signs the DSS-3800 is the same, then that person will be designated the PI. If the name and signature do not match, then the person that signs the application (if not the authorized representative) will be designated the PI.

It is mandatory that same day registration of applications and reapplications be done to:

(A) Ensure timely number assignment
(B) Ensure household access to EBT benefits
(C) Minimize the effect on case processing time frames.

(2) SNAP certification worker responsibilities

The certification worker is responsible for the following actions:

(A) Explaining EBT to the applicant/recipient during the interview. NOTE: The EW should use the DSS Flyer 24118, South Carolina EBT, for this explanation. A copy of the DSS Flyer 24118 should be given to the A/R following the explanation.

This explanation includes:

- EBT
- EBT purchases
- Balance inquiry
- PIN protection/replacement
- Card replacement
- Authorized card users

- Recipient help lines
- Recipient rights
- Penalties for misusing FS benefits
- Items that can/cannot be purchased with FS benefits.

(B) Authorizing the SNAP benefits
(C) Responding to or referring a recipient call concerning EBT benefits to the appropriate source. If the problem is not an eligibility issue, the Agency can refer the recipient to the EBT Vendor Helpline or to the EBT Coordinator. If the report is a lost, damaged or stolen card, the recipient should be referred to the EBT Helpline. Replacement cards are authorized through the JP Morgan toll-free customer service line. However, EBT Coordinators have access to authorize replacement cards through the EBT vendor's administration system.
(D) Resolving an EBT account. An inactive EBT account is an account with a balance in which there has been no withdrawal activity within a 60-day time period.

Once a benefit has been posted to the account, even if the recipient is not eligible for the benefit, the Agency cannot debit the account except through:

- Authorized claims payment
- Expungement after twelve (12) months of account inactivity
- EBT System adjustment

The Agency should take immediate action upon learning of an inactive account. Actions such as case closure, address change, retraining, PIN/card replacement, etc. should be initiated within appropriate time frames.

(E) Authorizing replacement of food purchased with EBT benefits in the event of a household misfortune. The EBT Coordinator will process the replacement on CHIP screen FSRE.
(F) Determining the nature of a fair hearing request. If the fair hearing request is the result of an EBT Contractor action, the fair hearing request should be forwarded to the SCEBT office.
(G) Resolving any problem associated with returned mail EBT cards or unauthorized use of a mailed EBT card.

(3) SNAP certification supervisor responsibilities

The SNAP certification supervisor is responsible for the following actions:

(A) Authorizing supplemental benefits

(B) Authorizing restoration of lost benefits due to Agency error **AND**

(C) Authorizing the replacement of benefits due to household misfortune.

(4) EBT Coordinator responsibilities

The EBT Coordinator's job duties consist of the following actions:

(A) Training recipients when necessary, on EBT related issues.
(B) Responding to recipient calls and resolving problems related to EBT
(C) Authorizing replacement cards for reapplications or situations in which households report lost, damaged, or stolen cards.
(D) Validating card status
(E) Processing the replacement of benefits due to household misfortune on CHIP screen FSRE

22.4 AUTHORIZING EBT ISSUANCES

(1) Authorization Schedule

The Agency must ensure that benefits are authorized according to the following schedule:

(A) Newly certified households. Benefits must be authorized no later than the 27th day after the application date so that eligible households can participate by the 30th day.
(B) Expedited processing. Benefits must be authorized no later than the sixth day after the application date so that eligible households can participate by the seventh day.

(2) Availability of Benefits

SNAP benefits are available to the household the day after the benefits are authorized on CHIP, provided the household has an EBT card. For ongoing cases, SNAP benefits are available on the date that corresponds to the last digit of the recipient's SNAP case number.

(3) Card Activation

SNAP households cannot use telephonic pinning until benefits have been approved and posted to the EBT account. This includes instances of new, but not yet approved applications and reapplications where the EBT account was previously deleted from the contractor's system.

PIN changes and replacement card pin selection on existing accounts can be pinned by telephone immediately upon receipt regardless of the EBT account balance. To use the telephonic pinning process, the household must have his/her 16 digit EBT card number, six digit birth date, and nine digit social security number. If the household does not have a social security number, the EBT card may be pinned by using all zeroes.

22.5 EBT CARD PRODUCTION

EBT cards are produced by the EBT vendor and mailed daily directly to the household. An EBT card is generated in each of the following situations:

(A) Initial approval of benefits. A household can continue to use the original EBT card even after periods of non-participation.
(B) New PI is identified
(C) Household reports a lost, damaged or stolen card

All EBT cards are mailed via first class mail.

22.6 NON-RECEIPT OF EBT CARDS

(1) Mailing of EBT cards

All SCEBT cards are mailed directly from the EBT card vendor's card production site.

(2) Returned Mailed Cards

All SCEBT cards that are declared non-deliverable by the US Postal Service (USPS) will be delivered to the SCEBT USPO Box 100229, Columbia, SC 29202-3229. This is the same address that is printed on the back of the new SCEBT card for cards found or returned by the cardholder.

Note: Returned cards <u>will not</u> be forwarded to county offices regardless of the circumstance. Replacement cards will be handled through the process that follows.

(3) Reporting Non-Receipt of EBT Card

The household will contact either the EBT vendor helpline or the local county DSS office to report the non-receipt of the household's EBT card.

(A) If the EBT vendor helpline is contacted and the card is in card status "11", the EBT vendor helpline will update the address promptly on the CHIP ADDR screen and then immediately process a replacement card.
(B) If the local county office is notified, the EBT vendor system should be reviewed. If the card is in status "11", the address must be corrected on CHIP, and then a replacement card can be requested, either by the EBT Coordinator processing a replacement card on the EBT vendor system or by calling the EBT vendor helpline.
(C) Non-receipt of a mailed EBT card may mean that the card was lost in the mail, undeliverable, or stolen. If a household reports that a mailed card has not yet been received, SNAP certification will contact the EBT Coordinator to determine the following:

i. Sufficient time has elapsed for the card to reach the household. A rule of thumb in this instance is three to five days following the date of mailing.
ii. The card has not been returned as undeliverable (Code "11" on the EBT Vendor Administrative System).

iii. The card has or has not been used since the date of mailing. The EBT Vendor Administrative System must be accessed to determine this.

If sufficient time has elapsed for the card to reach the household and the card has not been returned as undeliverable, the card shall be immediately statused through the EBT Vendor Administrative System or by calling the toll free EBT helpline. The household shall be contacted and advised of this and given the option of the replacement card being mailed or having the household come to the office for card issuance/PIN selection.

If the card has been used and the account debited or an attempt to use it has been made but no account debit has been made, the card shall be immediately statused through the EBT Vendor Administrative System or by calling the toll free EBT Helpline. If an account debit occurred, the household must be questioned as to the possible circumstances and whether or not he/she understands the use of an EBT card by a household member. This should happen before the replacement card is mailed.

The SCEBT shall handle all claims of unauthorized use of an EBT card on cards reported as non-received.

(4) Unauthorized use of EBT card

SNAP benefits are considered in the possession of the household once the benefits are posted to the account and the client has the card. Unauthorized use of an EBT card is defined as an individual, not authorized by any member of the household, using the card to make transactions that reduce or increase the balance in the EBT account. An individual is authorized to make transactions if he/she has received the EBT card and has PIN access. It is the responsibility of the household to secure the EBT card and PIN. If the household is negligent and does not secure the EBT card and PIN in such a way as to allow others access to this information, the household is still responsible for the transactions that subsequent occur – in the same fashion as someone who leaves her pocketbook out and someone steals the cash out of the wallet.

If a household contends that an unauthorized person(s) made debit(s) to his/her EBT account, the SNAP certification staff shall evaluate the claim.

- If the client indicates that the retailer has accessed funds incorrectly (double debiting of account, cashier issue), contact the SCEBT office. The SCEBT office will review all available information/findings and assist in facilitating replacement of funds by the retailer;
- If the client indicates that funds were accessed by others after the client has received the card (stolen wallet for example), the client should file a police report and seek replacement from the individual who has committed the thief through the judiciary process.
- If the client has received an expedited EBT card at the county office that was linked to another's case, contact the SCEBT office. The SCEBT office with facilitate in making the correct client whole. Project Fair funding may be used to cover such corrections, if the balance in the account of the client who used the other client's benefits is not sufficient.

If a determination is made that replacement of funds is not appropriate as indicated above, the household will be advised of his/her right to a fair hearing. The SCEBT will represent the agency in fair hearings regarding such EBT activities. If the fair hearing officer rules in favor of the household, the household will be entitled to a restoration of the lost benefits taken from the EBT account. A copy of the fair hearing decision documentation and other relevant documents will be filed in the electronic case record. Certification staff will authorize a restoration of these benefits in a whole-dollar amount. These benefits will be entered on CHIP screen UNAU.

22.7 RELOCATION OF SNAP HOUSEHOLDS TO OTHER STATES

Households relocating to other states may use their EBT card in these states for the remaining benefits in their account.

22.8 AUTHORIZING REPLACEMENTS FOR HOUSEHOLD MISFORTUNES

Household misfortune is defined as an isolated personal disaster such as fire and flooding which destroys or substantially damages food purchased with SNAP benefits. Upon receiving a request for replacement of SNAP benefits and/or food purchased with SNAP benefits in a household misfortune, SNAP certification staff must:

(A) Determine if the benefits were validly issued.
(B) Determine if the report of the loss was made timely (i.e., within 10 days of the reported destruction).
(C) Ensure that a DSS Form 1634B is completed and signed by a responsible household member.
(D) Determine if the loss was due to a household misfortune. Household misfortune is defined as being caused by an occurrence such as power outage, flood, fire, etc. but does not include mechanical failure. The misfortune must be verified through a collateral contact, home visit, through a community agency such as Red Cross, or the fire department.
(E) Recommend a replacement of benefits and/or food in the actual amount of the loss but not to exceed the last issued amount of the household monthly benefits. If the monthly benefits include restored benefits, they must be replaced up to their full value.

SNAP certification staff must approve a replacement within 10 calendar days of the reported loss.

When authorizing a replacement of food purchased with EBT benefits, the EBT Coordinator must process the replacement on CHIP screen FSRE.

The following documentation and reconciliation procedures must be completed:

- SNAP certification staff documents in the household’s case file each request for a replacement, the date, the reason and whether or not the replacement was provided.

- SNAP certification staff maintains a record of replacements granted to a household, the reason, the benefit month and actual month of the replacement **AND**
- The EBT Coordinator files all affidavits for losses with the MR220 for documentation.

22.9 EBT ADJUSTMENTS

An EBT adjustment may be required in situations such as, but not limited to, cashier error, multiple debits or credits, or system errors.

Households have up to 90 calendar days to initiate a correction request in these situations. The household must call the EBT Helpline number (1-800-554-5268) to initiate such a request. Client initiated credit adjustments must be adjudicated and processed within 10 business days from the date the client reports the error. The client must note the claim tracking number received via the EBT Helpline in case follow-up is needed.

Retailers will notify the EBT office when erroneous transactions have occurred which require debits to the client's account. CHIP notice X025, Manual Debit of EBT Services, will be automatically sent in this situation. The notice will provide details as to the transaction in question (amount, time and date), and the retailer involved.

It will let the client know that, if he/she disagrees with the action being taken, the client may request a fair hearing within 90 days from the notice date.

If the fair hearing is requested within 10 days of the notice date, no adjustment will be made to the EBT account pending the fair hearing decision. The SCEBT Office will be responsible for coordinating receipt of documentation of the transaction in question and defending the proposed action.

Clients must notify the SCEBT Office timely if they wish a fair hearing and a hold on the proposed debiting of the account so that the SCEBT can flag the account to stop the automatic debit adjustment. If the subsequent fair hearing decision is adverse to the client, the transaction amount will be debited from the account.

Chapter 23 Claims Against Households

This chapter is to be used as guidance for the SNAP certification staff in the detection and referral of recipient claims and to assist the certification role in working with the household and the Recipient Claims Worker (RCW). It is the certification staff's responsibility to refer possible claims and the RCW's responsibility to act on these referrals. Additional policy and procedures for establishing claims can be found in the FI and FS Recipient Claims Policy Manual.

23.1 DEFINITION OF A RECIPIENT CLAIM

A recipient claim is an amount owed to the Agency because of:

(A) SNAP benefits are overpaid
(B) SNAP benefits are trafficked. Trafficking means the buying or selling of SNAP benefit instruments for cash or consideration other than eligible food. Trafficking may also mean the exchange of firearms, ammunition, explosives or certain controlled substances for SNAP benefits.

The amount of the recipient is determined by investigating the case and determining the correct amount of issuance. In the event of trafficking or misuse of benefits, the total amount of benefits trafficked or misused is the amount of the claim. The difference between the amount actually received and the amount that should have been received is the amount of the claim. Claims must be calculated according to the policies and procedures of the SNAP at the time the overpayment occurred.

23.2 POSSIBLE RECIPIENT CLAIMS

All situations involving potential overpayment/trafficking are referred to as possible claims. In addition, local county DSS offices are required to submit possible claims referrals in all Quality Control (QC) error cases that cite an overpayment. Any referral made to the RCW must be made on a DSS-1680, Possible Claims Referral Form.

All possible claims should be referred by the county in which they were detected. If a case is transferred from one county to another, coordination between counties on possible claims should be resolved no later than 60 days after the case is transferred to a new county.

(1) Certification staff responsibilities for possible recipient claims

SNAP certification staff has the following responsibilities regarding procedures for possible claims referrals:

(A) Complete in duplicate a DSS Form 1680, Possible Claims Referral Form. All referrals must contain complete information including a potential claim classification based on the reason for the overpayment. See **Section 23.3 Classification of Recipient Claims**. Any appropriate documentation to assist in the recipient claims staff's investigation of the claim should be attached. If the certification worker is requesting information to correct future benefits and information from this source is relevant to the overpayment, the certification worker should request information for the overpayment period as well. The certification worker is not required to request information to substantiate the claim unless it is relevant to the household's on-going eligibility determination. The DSS Form1680 should be forwarded with copies of requests for pending information, if pending information is appropriate. When this information is provided to the Agency, it should be forwarded to the RCW immediately upon receipt
(B) Notify the RCW of the DSS Form 1680 within 10 working days from the date of detection indicated on the form.
(C) File a copy of the DSS Form1680 in the SNAP case file **AND**
(D) Correct the current or future benefit issuance when it is determined that a case is incorrect.

SNAP certification staff should not work overpayments in correction mode on CHIP in order to avoid problems for recipient claims staff. Overpayment determinations should be calculated using mini budget screen FSMB.

(2) Recipient claims staff responsibilities for possible recipient claims

The recipient claims staff has the following responsibilities concerning claims referrals:

(A) Review the possible claim referral.
(B) Review the case file.
(C) Determine classification of claim, period of over-issuance and over-issuance amount. Complete the DSS Form 2619A, Account of Claim Activity/Report (and the DSS Form 2619B, Account of Claim Activity/Report Part 2 for FS IPV Claims) **AND**
(D) Follow other recipient claims staff duties as outlined in SNAP/FI Recipient Claims Manual.

23.3 CLASSIFICATION OF RECIPIENT CLAIMS

SNAP certification staff must assign a potential classification to possible recipient claims based on the reasons for the over-issuance. Claims may be assigned the following classifications:

(1) Agency Error

Agency Error (AG) claims, are any claims for an overpayment caused by an action or failure to take action by the Agency. In some instances, an over-issuance must be classified as AG even if the Agency is not totally at fault. An example of this would be if the Agency acts on verification provided directly to the Agency by an income source with no involvement of the household. Instances which may result in an AG claim include, but are not limited to the Agency's:

(A) Failure to take prompt action on a reported change
(B) Incorrect computation of the amount of benefits
(C) Incorrect benefit issuance due to computer system error
(D) Continued benefits to a SNAP household after its certification period has expired without the household having been recertified
(E) Failure to act on information received through the Income and Eligibility Verification System (IEVS) which causes an overpayment. Agency access to IEVS information does not relieve the household of its responsibility to report changes accurately. SNAP certification staff is required to check IEVS at certification, recertification and CHIP alert notification.
(F) Failure to timely impose a disqualification on a SNAP participant when an IPV has been adjudicated administratively or judicially.

(2) Inadvertent household error

Inadvertent household error (CL) claims are the result of a misunderstanding or unintentional error on the part of a household who otherwise complies with SNAP requirements. These claims occur when a household:

(A) Fails to report a required change and the household's failure to act or report as required is the result of a lack of understanding of program requirements or inadvertent error
(B) Unintentionally fails to report circumstances correctly but otherwise complies with program requirements.

The household is responsible for any information that they provide to the Agency regardless of the origin of the information.

For example, the household is responsible for information in a letter from an employer if the household obtained the information. The household is not responsible if the letter was sent directly from the employer to the Agency.

(3) Intentional Program Violation

An intentional program violation (IPV) claim is any claim in the SNAP for an overpayment or trafficking resulting from a person having intentionally:

(A) Misrepresented, concealed, withheld facts or made a false or misleading statement
(B) Committed any act that constitutes a violation of the Food and Nutrition Act, the SNAP regulations, or any state statute relating to the use, presentation, transfer, acquisition, receipt, or possession of SNAP benefits.

A claim cannot be assigned as an IPV unless:

i. It has been determined through an Administration Disqualification Hearing (ADH) that a household member has committed an IPV
ii. The individual waives his/her right to an ADH by signing a DSS Form 1648, Administrative Consent Agreement (ACA)
iii. The individual receives approval to participate in a Pretrial Intervention (PTI) Program and the DSS Form 1648 has been forwarded to the recipient claims staff by the Office of Investigation (OI).

In determining a possible claim classification of IPV, recipient claims staff may need to communicate with the household to clarify information. Claims staff may do this by contacting the household and giving them an opportunity to explain any questionable circumstances. Claims staff may ask the household to discuss the issues over the telephone or respond in writing. Claims staff may also request that the household appear for an in-office interview but cannot require that they do so. If the household fails or refuses to respond to any such request, recipient claims staff, having otherwise completed his/her investigation and having sufficient evidence, may proceed with an Administrative Disqualification Hearing action to disqualify the individual. In no event may the household or household member be threatened with the possibility of termination for non-cooperation**.**

An individual, not a household, who intentionally violates SNAP regulations must be disqualified from SNAP participation. Recipient Claims staff will be responsible for investigating any case of alleged IPV/FR and ensuring that appropriate cases are acted upon either through administrative disqualification hearings or court referrals. See **Chapter 20 Disqualification for Intentional Program Violation.**

(4) Fraud

Fraud (FR) is defined as:

(A) False representation of facts by words or conduct
(B) False misleading allegations
(C) Concealment of that which should have been disclosed, which deceives and is intended to deceive another in order to obtain assistance illegally.

A person who commits fraud violates state and federal laws. As generally accepted in SC courts, the necessary elements of fraud are as follows:

i. A misrepresentation of a fact with intent to deceive, such as:
   - Positive assertion of falsehood
   - Concealment of the truth
   - Suppression of the truth
   - Establishment of a false impression by words, actions or trickery

ii. Knowledge of the falsity of the representation by the maker \
iii. Materiality of the fact misrepresented
iv. Reliance on the misrepresentation by the person deceived
v. Damage to the person deceived (benefit to the wrongdoer is normally immaterial). Damage is not required to prove a violation of SC Code 16-13-430, Fraudulent Acquisition or Use of FS.

A determination of fraud can only be made by a criminal court. Fraud must be proven by evidence which is beyond reasonable doubt. Many claims which the Agency might believe to have been caused by fraudulent action must be processed as IPV or CL because the Agency lacks the evidence to prove the claim in court.

An individual, not a household, who intentionally violates SNAP regulations, must be disqualified from SNAP participation. Recipient Claims staff will be responsible for investigating any case of alleged IPV/FR and ensuring that appropriate cases are acted upon either through administrative disqualification hearings or court referrals. See **Chapter 20 Disqualification for Intentional Program Violation.**

23.4 LIABILITY FOR RECIPIENT CLAIMS

The following individuals are responsible for paying a claim:

(A) Each person who was an adult member of the household when the overpayment or trafficking occurred.

The PI may not be held "automatically" responsible for trafficking the household's benefits if there is no direct evidence identifying him/her as the guilty party. However, the PI may be held responsible when there is sufficient circumstantial evidence to show his/her complicity in the violative act. Complicity in this case means that even though the PI may not have actually conducted the transaction, upon questioning there is convincing evidence that he/she was aware of it, may have benefited, and took no actions to correct it. Complicity may be shown by establishing a clear pattern of misuse over time with the PI not providing a reasonable explanation and never reporting a loss/theft of the EBT card or benefits.

(B) A sponsor of a non-citizen household if the sponsor is at fault

(C) A person connected to the household, such as an authorized representative, who causes an overpayment. This includes when a drug and alcohol addiction center (DAA) or other group living arrangement (GLA) acts as the authorized representative.
(D) A person connected to the SNAP household, such as an authorized representative, who actually traffics. This includes when a drug and alcohol addiction center (DAA) or other group living arrangement (GLA) acts as the authorized representative.

23.5 RECIPIENT'S RIGHT TO A FAIR HEARING ON A RECIPIENT CLAIM

SNAP certification staff should be aware that the recipient has a right to a fair hearing if he/she does not agree with the amount, the basis or the classification of the claim. The period to request a fair hearing is 90 days from the date of the first notification. The recipient may request continued benefits within 10 days of notification that benefits will be reduced.

The recipient may request a fair hearing by contacting recipient claims staff who are responsible for representing the Agency in the fair hearing for a recipient claim.

23.6 OFFSET OF RECIPIENT CLAIMS

An offset occurs any time a household is entitled to receive a restoration of lost benefits and there is an outstanding recipient. The amount of restoration the household is entitled to receive must be applied toward repayment of the claim. The household may receive the balance of the benefits after the claim has been paid in full. The CHIP automated offset occurs at the point the restoration is entered into the computer by the SNAP certification staff. An automated offset will not occur for the current month.

23.7 COLLECTION OF RECIPIENT CLAIMS

SNAP recipient claims staff will initiate collection of overpayments made in the SNAP case. Regardless of the classification of a claim, it is of primary importance to have the client sign a repayment agreement, DSS Form 2627A, Repayment Agreement and/Acknowledgement of Debt. The repayment agreement must contain due dates or time frames for the periodic submission of payments.

It must also specify that the household will be subject to an involuntary collection action(s) if payment is not received by the due date and the claim becomes delinquent.

Recipient claims staff must accept any payment for a claim whether it represents full or partial payment in any of the acceptable forms of repayment. Acceptable forms of repayment are:

(A) Reducing benefits prior to issuance. This includes allotment reduction and offsets to restored benefits.

(B) Reducing SNAP benefits after issuance. These are benefits from electronic benefit accounts.
(C) Accepting cash or any of its generally accepted equivalents. The equivalents include check or money order.
(D) Requiring the household to perform public service.

Automated recoupment will take place on all active cases. SNAP certification should recognize if an allotment has been reduced because of this collection. This reduction is indicated on CHIP screen FSBH. On inactive cases, the recipient must make cash payments to the local county DSS office or the State Office Division of Finance.

23.8 COLLECTION ACTION ON BANKRUPTCY CASES

When a person owing a claim, files for bankruptcy, the General Counsel will petition the bankruptcy court on behalf of the Agency. When written notification that a person has filed for bankruptcy is received by the Agency, all collection actions, including automated recoupment, will stop. If the SNAP certification staff becomes aware of a bankruptcy petition, certification staff will need to contact the recipient claims staff.

23.9 DELINQUENT RECIPIENT CLAIMS

A recipient claim must be considered delinquent if:

(A) The claim has not been paid by the due date on the initial demand letter and a satisfactory repayment agreement has not been made. The claim will remain delinquent until payment is received in full, a satisfactory repayment agreement is negotiated, or allotment reduction is invoked.
(B) A repayment agreement has been made and a scheduled payment has not been made by the due date. The date of the delinquency of a claim in this category is the due date of the missed payment. The claim will remain delinquent until payment is received in full, allotment reduction is invoked, or the Agency determines to either resume or renegotiate the repayment agreement.

A claim will not be considered delinquent if another claim for the same household is currently being paid either through a repayment agreement or allotment reduction and the Agency expects to begin collection on the claim once the prior claim(s) is settled.

A claim is not subject to the requirement for delinquent debts if the Agency is unable to determine delinquency status because collection is coordinated through the court system.

Recipient claims that are 90 days delinquent may be referred to the Claims Collection Unit (CCU) at State Office. CHIP automatically transfers these claims from the local county DSS Office on CHIP to CCU at a monthly delinquency determination. Once a delinquent claim has been transferred to CCU, the primary responsibility for collection action belongs to CCU.

CCU will initiate collection on delinquent SNAP recipient claims by:

- The SC Department of Revenue Debt Offset Program for claims at least 90 days delinquent
- The federal Treasury Offset Program for claims at least 180 days delinquent.

23.10 EBT CLIENT INTEGRITY PROJECT

The EBT Client Integrity Project is an EBT anti-fraud project designed to deter fraudulent misuse of the EBT card and/or benefits in the EBT account.

SNAP certification staff should refer any suspected misuse of the EBT card or SNAP benefits to the recipient claims staff who will review and research available data regarding suspected misuse and determine if contact with the household is necessary to obtain documentation as to the nature of the misuse.

Disqualification from the SNAP may occur if it is determined that a recipient has misused the EBT card and/or benefits in the EBT account, and adjudication supports this determination. The disqualification penalties are the same as those listed in **Section 20.5 Intentional Program Violation (IPV) Disqualification Time Periods**.

Chapter 24

Chapter 24 Program Performance Reporting System

24.1 GENERAL SCOPE AND PURPOSE

Under the Food and Nutrition Act, the agency is responsible for the administration of the SNAP in accordance with the Act, Regulations, and the Agency's plan of operation. To fulfill the requirements of the Act, the Agency will have a system for monitoring and improving its administration of the SNAP. The Agency is also responsible for reporting on its administration to FNS. These reports will identify program deficiencies and the specific administrative action proposed to meet the program requirements established by USDA, FNS. If it is determined, however, that the Agency has failed without good cause to meet any of the program requirements established by FNS, or has failed to carry out the approved State plan of operation, the FNS will suspend and/or disallow from the Agency such funds as are determined to be appropriate.

The Food and Nutrition Act authorizes FNS to pay the Agency an amount equal to 50 percent of all administrative costs involved in the Agency’s operation of the SNAP, The Act further authorizes FNS to increase the percentage share if:

(A) The Agency’s payment error rate is less than or equal to 5.90 percent, and
(B) The State agency's negative case error rate is less than the national weighted mean negative case error rate for the prior fiscal year.

If the Agency qualifies for an increased percentage share, the amount of increase will be an additional percentage point for each full tenth of a percentage point by which the payment error rate is less than six percent, up to a maximum of 60 percent of administrative costs.

Those State agencies not receiving the increased share of funding will develop and implement corrective action plans to reduce payment errors.

24.2 AGENCY RESPONSIBILITIES

The Agency will establish a continuing performance reporting system to monitor SNAP administration and program operations. The components of the Agency's performance reporting system will be:

(A) Data collection through management evaluation (ME) reviews and quality control (QC) reviews;
(B) Analysis and evaluation of data from all sources;
(C) Corrective action planning;
(D) Corrective action implementation and monitoring; and
(E) Reporting to FNS on program performance.

The Agency must ensure corrective action is effected at the State and local SNAP office levels. The Agency will employ sufficient State level staff to perform all aspects of the Performance Reporting System as required in this part of the regulations.

24.3 FEDERAL MONITORING

FNS will conduct the review to determine whether the Agency is operating the SNAP and the Performance Reporting System in accordance with program requirements. The Federal reviewer may consolidate the scheduling of these reviews to reduce the frequency of entry into the Agency. FNS regional offices will conduct additional reviews to examine the Agency (including local SNAP offices), as considered necessary to determine compliance with program requirements. FNS will notify the Agency of any deficiencies detected in program or system operations. Any deficiencies detected in program or system operations which do not necessitate long range analytical and evaluative measures for corrective action development will be immediately corrected by the State Agency. Within 60 days of receipt of the findings of each review established below, the Agency will develop corrective action addressing all other deficiencies detected in either program or system operations and will ensure that the Agency's own corrective action plan is amended and that FNS is provided this information at the time of the next formal semiannual update to the Agency's State Corrective Plan, as required in **Section 28.2 State Corrective Action Plan.**

(1) Reviews of State Agency's Administration/Operation of the SNAP

FNS will conduct an annual review of certain functions performed at the State agency level in the administration/operation of the SNAP. FNS will designate specific areas required to be reviewed each fiscal year.

(2) Reviews of State Agency's Management Evaluation System

FNS will review the Agency's management evaluation system on a biennial basis; however, FNS may review the Agency's management evaluation system on a more frequent basis if a regular review reveals serious deficiencies in the ME system.

The ME review will include but not be limited to a determination of whether or not the Agency is complying with FNS regulations, an assessment of the Agency's methods and procedures for conducting ME reviews, and an assessment of the data collected by the Agency in conducting the reviews.

(3) Validation of State Agency error rates

FNS will validate the Agency's payment error rate and under-issuance error rate during each annual quality control review period. Federal validation reviews will be conducted by reviewing against the Food and Nutrition Act and the regulations, taking into account any FNS-authorized waivers to deviate from specific regulatory provisions. FNS must validate the Agency's negative case error rate when the State Agency's payment error rate for an annual review period appears to entitle it to an increased share of Federal administrative funding for that period, and its reported negative case error rate for that period is less than two percentage points above the national weighted mean negative case error rate for the prior fiscal year. Any deficiencies detected in the Agency's QC system will be included in the Agency's State Corrective Action Plan.

(4) Assessment of Corrective Action

FNS will conduct a comprehensive annual assessment of the Agency's corrective action process by compiling all information relative to the Agency's corrective action efforts, including the Agency's system for data analysis and evaluation. The purpose of this assessment and review is to determine if:

- Identified deficiencies are analyzed in terms of causes and magnitude and are properly included in either the State or local SNAP office corrective action plan;
- The Agency is implementing corrective actions according to the appropriate plan;
- Target completion dates for reduction or elimination of deficiencies are being met; and
- Corrective actions are effective.

In addition, FNS will examine the Agency's corrective action monitoring and evaluative efforts. The assessment of corrective action will be conducted at the State level or local SNAP office, as necessary.

In addition, FNS will conduct on-site reviews of selected corrective actions as frequently as considered necessary to ensure that the Agency is implementing proposed corrective actions within the timeframes specified in the Agency or local SNAP office corrective action plans and to determine the effectiveness of the corrective action. The on-site reviews will provide the Agency and FNS with a mechanism for early detection of problems in the corrective action process to minimize losses to the program, participants, or potential participants.

24.4 RECORD RETENTION

The Agency will maintain Performance Reporting System records for ME and QC reviews to permit ready access to, and use of, these records. Performance Reporting System records include information used in data analysis and evaluation, corrective action plans, corrective action monitoring records in addition to ME review records and QC review records. To be readily accessible, system records will be retained and filed in an orderly fashion.

Precautions should be taken to ensure that these records are retained without loss or destruction for the 3-year period required by these regulations. Information obtained on individual households for Performance Reporting System purposes will be safeguarded in accordance with FNS policies on disclosure of information for the SNAP.

Chapter 25 Quality Control Reviews

25.1 SCOPE AND PURPOSE

As part of the requirements by USDA FNS's Performance Reporting System, the Agency is responsible for conducting quality control reviews of SNAP households. Quality Control (QC) reviews measure the validity of SNAP cases at a given time (the review date) by reviewing against the SNAP standards established in the Food and Nutrition Act and the SNAP Regulations, taking into account any FNS authorized waivers to deviate from specific regulatory provisions. USDA FNS and the Agency will analyze findings of the reviews to determine the incidence and dollar amounts of errors, which will determine the Agency's liability for payment errors and eligibility for bonus funding, and to plan corrective action to reduce excessive levels of errors.

The objectives of quality control reviews are to provide:

(A) A systematic method of measuring the validity of the SNAP caseload;
(B) A basis for determining error rates;
(C) A timely continuous flow of information on which to base corrective action at all levels of administration; **AND**
(D) A basis for establishing the Agency's liability for errors that exceed the National standard and the Agency's eligibility for bonus funding.

25.2 SAMPLE OF CASES

A sample of households shall be selected from two different categories:

- Households which are participating in the SNAP (called active cases). Reviews will be conducted on active cases to determine if households are eligible and receiving the correct allotment of SNAP benefits.
- The determination of whether the household received the correct allotment will be made by comparing the eligibility data gathered during the review against the amount authorized on the master issuance file.

- Households, for which participation was denied, suspended or terminated (called negative cases). Reviews of negative cases shall be conducted to determine whether the Agency's decision to deny, suspend or terminate the household, as of the review date, was correct.

A statewide sample of cases is selected randomly each month. It is the responsibility of the local county DSS office to make all volumes of the case file with all pertinent verification/ documentation available to QC within five days of the request. If a local county office is not scanning case file documentation into the South Carolina Office Scanning Application (SCOSA) and must send a paper case file to QC, QC will return the case file to the county office within 10 days. The SNAP certification supervisor must review the case file for complete verification/ documentation prior to sending it to QC.

25.3 QUALITY CONTROL (QC) FINDINGS

QC's findings will be reported to the county on a DSS Form 2039, Food Stamp Quality Control Review Report. A DSS Form 2001, County Report of Case Action Taken on Quality Control Findings will be attached for cases found in error.

A local county DSS office may disagree with, or question a QC decision through the use of DSS Form 2001, County Report of Case Action Taken on Quality Control Findings, which is attached to all error reports. If a DSS Form 2001 is not returned by the county within 10 working days from the date of mailing, the findings are reported to the appropriate regional office. It is essential that QC findings be reviewed by the local county DSS office immediately upon receipt and the DSS Form 2001 returned within the allowed time frame for all error cases.

If the local county DSS office disagrees with the findings, the following procedures apply:

(A) Review case file and QC report **AND**
(B) Complete DSS Form 2001 and send the original to QC along with supporting documentation to substantiate the disagreement. A copy should be filed in the case record.

25.4 SNAP HOUSEHOLDS RESPONSIBILITY IN THE QUALITY CONTROL (QC) PROCESS

SNAP households are required to cooperate in a QC review. Failure to cooperate will result in:

(A) For state reviews, closure of the case until the household cooperates or 95 days after the end of the annual review period.

For federal reviews, closure of the case until the household cooperates or seven months after the end of the annual review period, i.e. seven months after September 30. SNAP certification staff will take no further action until notified by QC that the household has cooperated**.**

(B) Reapplication being subject to 100% verification of eligibility requirements except for those household's that are eligible for expedited service.
(C) Examination for possible referral for investigation of willful misrepresentation.

Chapter 26

Chapter 26 Management Evaluation (ME) Reviews

26.1 SCOPE AND PURPOSE

(1) Objectives

The Division of Family Assistance (FA) will ensure that local SNAP offices operate the SNAP in accordance with the Act, regulations, and FNS-approved State Plan of Operation. To ensure compliance with program requirements, ME reviews will be conducted to measure compliance with the provisions of FNS regulations. The objectives of an ME review are to:

(A) Provide a systematic method of monitoring and assessing program operations in the local SNAP offices;
(B) Provide a basis for local SNAP offices to improve and strengthen SNAP program operations by identifying and correcting deficiencies; and
(C) Provide a continuing flow of information between the local SNAP offices, the State level SNAP administration, and FNS, necessary to develop the solutions to problems in program policy and procedures.

(2) Frequency of review

The Agency will shall conduct a review:

(A) Once every year for large local SNAP offices;
(B) Once every two years for medium local SNAP office areas, and
(C) Once every three years for small local SNAP offices.

FNS may require the Agency to conduct additional on-site reviews when a serious problem is detected in a local SNAP office which could result in a substantial dollar or service loss.

The Agency will also establish a system for monitoring those local SNAP offices which experience a significant influx of migratory workers during such migrations. This requirement may be satisfied by either scheduling ME reviews to coincide with such migrations or by conducting special reviews.

As part of the review the Agency will contact local migrant councils, advocate groups, or other organizations in the project area to ensure that migrants are receiving the required services.

26.2 REVIEW COVERAGE

During each review period, the Agency will review the national target areas of program operation specified by FNS. FNS will notify the Agency of the minimum program areas to be reviewed at least 90 days before the beginning of each annual review period, which is the Federal fiscal year. FNS may add additional areas during the review period if deemed necessary. The FNS headquarters office will add national target areas during the review period only for deficiencies of national scope. The Agency has 60 days in which to establish a plan schedule for such reviews.

The Agency will be responsible for reviewing each national target area or other program requirement based upon the provisions of the regulations governing the SNAP and the FNS-approved State Plan of Operation. If FNS approves the Agency's request for a waiver from a program requirement, any different policy approved by FNS would also be reviewed. When, in the course of a review, a local SNAP office is found to be out of compliance with a given SNAP requirement, the Agency will identify the specifics of the problem including:

- The extent of the deficiency;
- The cause of the deficiency, and,
- As applicable, the specific procedural requirements the local SNAP office is misapplying.

26.3 REVIEW PROCESS

(1) Review procedures

The Agency will review the SNAP requirements specified for ME review using procedures that are adequate to identify problems and the causes of those problems.

As each local SNAP office's operational structure will differ, the Agency will review each SNAP requirement applicable to the local SNAP office in a manner which will best measure the local SNAP office's compliance with each program requirement.

(2) ME review plan

The Agency will develop a review plan prior to each ME review. This review plan will specify whether each local SNAP office is large, medium, or small and will contain:

(A) Identification of the local SNAP office to be reviewed, SNAP areas to be reviewed, the dates the review will be conducted, and the period of time that the review will cover;
(B) Information secured from the local SNAP office regarding its caseload and organization;
(C) Identification of the various SNAP elements selected for review and the techniques used to select them;
(D) A description of the review method(s) the Agency plans to use for each SNAP area being reviewed.

ME review plans will be maintained in an orderly fashion and be made available to FNS upon request.

(3) Review methods

The Agency will determine the method of reviewing the SNAP requirements associated with each program area. For some areas of SNAP operation, it may be necessary to use more than one method of review to determine if the local SNAP office is in compliance with SNAP requirements. The procedures used will be adequate to identify any problems and the causes of those problems. The Agency will ensure that the method used to review a SNAP requirement does not bias the review findings. Bias can be introduced through leading questions, incomplete reviews, incorrect sampling techniques, etc.

(4) Review worksheet

The Agency will use a review worksheet to record all review findings. For each review, the Agency will, on the worksheet, identify:

(A) The local SNAP office being reviewed;
(B) Each SNAP requirement reviewed in the local SNAP office;
(C) The method used to review each SNAP requirement;
(D) A description of any deficiency detected;
(E) The cause(s) of any deficiency detected, if known;
(F) The number of case files and/or SNAP records selected and examined within the local SNAP office, identification of those selected (record case number, household name, etc.), the proportion which were not subject to review, as well as the method used to select the sample;
(G) Where applicable, the numerical extent of any deficiency detected through examination of program records; and
(H) Any pertinent comments concerning the local SNAP office's operation.

All information collected through ME review findings will promptly be used by the Division of FA for analysis, evaluation, and corrective action planning. Review worksheets shall be retained in an orderly fashion and made available to FNS upon request.

Chapter 27

Chapter 27 Data Analysis and Evaluation

27.1 DATA MANAGEMENT

(1) Analysis

Analysis is the process of classifying data, such as by areas of program requirements or use of error-prone profiles, to provide a basis for studying the data and determining trends including significant characteristics and their relationships.

(2) Evaluation

Evaluation is the process of determining the cause(s) of each deficiency, magnitude of the deficiency, and geographic extent of the deficiency, to provide the basis for planning and developing effective corrective action.

The Division of Family Assistance (FA) must analyze and evaluate at the State and local SNAP office levels all management information sources available to:

(A) Identify all deficiencies in program operations and systems;
(B) Identify causal factors and their relationships;
(C) Identify magnitude of each deficiency, where appropriate (This is the frequency of each deficiency occurring based on the number of program records reviewed and where applicable, the amount of loss either to the program or participants or potential participants in terms of dollars. The Agency will include an estimate of the number of participants or potential participants affected by the existence of the deficiency, if applicable);
(D) Determine the geographic extent of each deficiency (e.g., Statewide/local SNAP offices); and,
(E) Provide a basis for management decisions on planning, implementing, and evaluating corrective action.

In the evaluation of data, situations may arise where the Division of FA identifies the existence of a deficiency, but after reviewing all available management information sources sufficient information is not available to make a determination of the actual causal factor(s), magnitude, or geographic extent necessary for the development of appropriate corrective action. In these situations, the Division of FA will be responsible for gathering additional data necessary to make these determinations.

Deficiencies identified from all management information sources must be analyzed and evaluated together to determine their causes, magnitude, and geographic extent. Causes indicated and deficiencies identified must be examined to determine if they are attributable to a single cause and can be effectively eliminated by a single action. Deficiencies and causes identified must also be compared to the results of past corrective action efforts to determine if the new problems arise from the causal factors which contributed to the occurrence of previously identified deficiencies.

Data analysis and evaluation must be an ongoing process to facilitate the development of effective and prompt corrective action. The process will also identify when deficiencies have been eliminated through corrective action efforts, and will provide for the reevaluation of deficiencies and causes when it is determined that corrective action has not been effective.

27.2 IDENTIFICATION OF HIGH ERROR AREAS

USDA, FNS may use QC information to determine which project areas/counties/local offices have reported payment error rates that are either significantly greater than the State agency average or greater than the national error standard of the Program. When FNS notifies the Agency that a "high error" area exists, the Agency will ensure that corrective action is developed and reported in accordance with the provisions **Section 28.2 State Corrective Action Plan**.

If FNS identifies a "high error" locality which the Agency has previously identified as error-prone and taken appropriate action, no further action will be required. If the Agency's corrective action plan fails to address problems in FNS-identified "high error" areas, FNS may require the Agency to implement new or modified cost-effective procedures for the certification of households.

Chapter 28 Corrective Action

28.1 CORRECTIVE ACTION PLANNING

Corrective action planning is the process by which the Agency will determine appropriate actions to reduce substantially or eliminate deficiencies in SNAP operations and provide responsive service to eligible households.

The Agency (including local SNAP offices) will implement corrective action on all identified deficiencies. Deficiencies requiring action by the Agency (including local SNAP offices in the planning, development, and implementation of corrective action are those which:

(A) Result from a payment error rate of 6 percent or greater (actions to correct errors in individual cases, however, will not be submitted as part of the Agency's corrective action plan);
(B) Are the cause for non-entitlement to enhanced funding for any reporting period (actions to correct errors in individual cases however, will not be submitted as part of the Agency's corrective action plan);
(C) Are the causes of other errors/deficiencies detected through QC, including error rates of 1 percent or more in negative cases (actions to correct errors in individual cases, however, will not be submitted as part of the Agency's corrective action plan);
(D) Are identified by FNS reviews, GAO audits, contract audits, or USDA audits or investigations at the Agency (including local SNAP offices) (except deficiencies in isolated cases as indicated by FNS);
(E) Result from 5 percent or more of the State agency's QC sample being coded "not complete". This standard shall apply separately to both active and negative samples; and
(F) Result in under issuances, improper denials, or improper terminations of benefits to eligible households where such errors are caused by Agency rules, practices or procedures.

The Agency will ensure that appropriate corrective action is taken on all deficiencies including each case found to be in error by QC reviews and those deficiencies requiring corrective action only at the local SNAP office level.

Moreover, when a substantial number of deficiencies are identified which require Agency or local SNAP office level corrective action, the Agency or local SNAP office will establish an order of priority to ensure that the most serious deficiencies are addressed immediately and corrected as

soon as possible. Primary factors to be considered when determining the most serious deficiencies are:

- Magnitude of the deficiency;
- Geographic extent of the deficiency (e.g., Statewide/local SNAP office);
- Anticipated results of corrective actions; and
- High probability of errors occurring as identified through all management evaluation sources.

In planning corrective action, the Agency will coordinate actions in the areas of data analysis, policy development, quality control, program evaluation, operations, administrative cost management, civil rights, and training to develop appropriate and effective corrective action measures.

28.2 STATE CORRECTIVE ACTION PLAN

The Division of Family Assistance will prepare corrective action plans addressing those deficiencies specified in **Section 28.1 Corrective Action Planning** requiring action by the Agency (including local SNAP offices). This corrective action plan is an open-ended plan and will remain in effect until all deficiencies in SNAP operations have been reduced substantially or eliminated. The Agency will provide updates to their corrective action plans through regular, semiannual updates. These semiannual updates will be received by FNS by May 1st and November 1st respectively. Such updates must contain:

- Any additional deficiencies identified since the previous corrective action plan update;
- Documentation that a deficiency has been corrected and is therefore being removed from the plan; and
- Any changes to planned corrective actions for previously reported deficiencies.

The Agency corrective action plans will contain, but not necessarily be limited to, the following, based on the most recent information available:

(A) Specific description and identification of each deficiency;
(B) Source(s) through which the deficiency was detected;
(C) Magnitude of each deficiency, if appropriate;
(D) Geographic extent of the deficiency (e.g., Statewide/local SNAP office, specific project areas in which the deficiency occurs);
(E) Identification of causal factor(s) contributing to the occurrence of each deficiency;
(F) Identification of any action already completed to eliminate the deficiency;
(G) For each deficiency, an outline of actions to be taken, the expected outcome of each action, the target date for each action, and the date by which each deficiency will have been eliminated; and

(H) For each deficiency, a description of the manner in which the State agency will monitor and evaluate the effectiveness of the corrective action in eliminating the deficiency.

FNS will provide technical assistance in developing corrective action plans when requested by the Agency. The Agency will be held accountable for the efficient and effective operation of all areas of the program. FNS is not precluded from issuing a warning because a deficiency is included in the State agency's corrective action plan.

28.3 LOCAL SNAP OFFICE CORRECTIVE ACTION PLAN

The Division of Family Assistance (FA) at the state level of the4 Agency will ensure that corrective action plans are prepared at the local SNAP office level, addressing those deficiencies not required to be included in the State corrective action plan. The local SNAP office corrective action plans will be open-ended and will remain in effect until all deficiencies in SNAP program operations have been reduced substantially or eliminated.

Any deficiencies detected through any source not previously reported to the Division of FA, which require incorporation into the local SNAP office corrective action plan, will be submitted within 60 days of identification.

As deficiencies are reduced substantially or eliminated, the local SNAP office will notify the Division of FA in writing. The local SNAP office will be responsible for documenting why each deficiency is being removed from the corrective action plan. The removal of any deficiency from the plan will be subject to Division of FA and FNS review and validation.

Local SNAP office corrective action plans will contain all the information necessary to enable the Division of FA to monitor and evaluate the corrective action properly. Also, the Division of FA will establish requirements for local SNAP offices in planning, implementing and reporting corrective action to assist the Agency’s efforts to fulfill its responsibilities for determining which deficiencies must be addressed in the State corrective action plan. Local SNAP office corrective action plans will include the following, based on the most recent information available:

(A) Specific description and identification of each deficiency;
(B) Source(s) through which the deficiency was detected;
(C) Magnitude of each deficiency, if appropriate;
(D) Geographic extent of the deficiency (throughout the local SNAP office or only in specific offices);
(E) Identification of causal factor(s) contributing to the occurrence of each deficiency;
(F) Identification of any action already completed to eliminate the deficiency;
(G) For each deficiency, an outline of actions to be taken, the expected outcome of each action, the target date for each action, the date by which each deficiency will have been eliminated; and

(H) For each deficiency, a description of the manner in which the local SNAP office will monitor and evaluate the effectiveness of the corrective action in eliminating the deficiency

28.4 MONITORING AND EVALUATION

The Division of FA will monitor and evaluate corrective action at the State and local SNAP office levels. Monitoring and evaluation will be an ongoing process to determine that deficiencies are being substantially reduced or eliminated in an efficient manner and that the SNAP provides responsive service to eligible households.

The Division of FA will ensure that corrective action on all deficiencies identified in the State Corrective Action Plan and local SNAP office Corrective Action Plan is implemented and achieves the anticipated results within the specified time frames. The Division of FA will monitor and evaluate corrective action at the State and local SNAP offices through a combination of reports, field reviews, and examination of current data available through program management tools and other sources.

In instances where the Division of FA and/or local SNAP offices determines that the proposed corrective action is not effective in reducing substantially or eliminating deficiencies, the Division of FA and/or the local SNAP office will promptly reevaluate the deficiency, causes, and the corrective action taken, and develop and implement new corrective actions.

Chapter 29

Chapter 29 Determination of State Agency Program Performance

29.1 AGENCY PROGRAM PERFORMANCE

USDA, FNS will determine the efficiency and effectiveness of a State's administration of the SNAP by measuring:

(A) State compliance with the standards contained in Food and Nutrition Act, regulations, and the State Plan of Operation; and
(B) State efforts to improve SNAP operations through corrective action.

This determination will be made based on:

(A) Reports submitted to FNS by the State;
(B) FNS reviews of State agency operations;
(C) State performance reporting systems and corrective action efforts; and
(D) Other available information such as Federal audits and investigations, civil rights reviews, administrative cost data, complaints, and any pending litigation.

29.2 STATE AGENCY ERROR RATES

FNS will estimate the State agency's error rates based on the results of QC review reports. The Agency's active case error, payment error, under-issuance error, and negative case error rates will be estimated as follows:

(A) Active case error rate. The active case error rate shall include the proportion of active sample cases which were reported as ineligible or as receiving an incorrect allotment;
(B) Payment error rate. *The* payment error rate will include the value of the allotments over-issued, including those to ineligible cases, and the value of allotments under-issued for those cases included in the active error rate.
(C) Negative case error rate. The negative case error rate will be the proportion of negative sample cases which were reported as having been eligible at the time of denial, suspension or termination.

29.3 STATE AGENCY LIABILITY FOR ERROR RATES

At the end of each federal fiscal year, each State agency's payment error rate over the entire fiscal year will be computed and evaluated to determine whether the payment error rate goals established in the following paragraphs have been met. FNS will announce a national performance measure not later than June 30 after the end of the fiscal year. The national performance measure is the sum of the products of each State agency's error rate times that State agency's proportion of the total value of national allotments issued for the fiscal year using the most recent issuance data available at the time the State agency is notified of its payment error rate. Once announced, the national performance measure for a given fiscal year will not be subject to change. The national performance measure is not subject to administrative or judicial review.

Liability for payment will be established whenever there is a 95 percent statistical probability that, for the second or subsequent consecutive fiscal year, a Agency's payment error rate exceeds 105 percent of the national performance measure. The Agency's liability for payment error rates as determined above are not subject to the FNS warning process. The amount of the liability shall be equal to the product of:

- The value of all allotments issued by the Agency in the (second or subsequent consecutive) fiscal year; multiplied by
- The difference between the Agency's payment error rate and 6 percent; multiplied by
- 10 percent

Whenever a State is assessed for an excessive payment error rate, the state will have the right to request an appeal. When a State agency with otherwise effective administration exceeds the tolerance level for payment errors as described in this section, the agency may seek relief from liability claims that would otherwise be levied under this section on the basis that the agency had good cause for not achieving the payment error rate tolerance. The five unusual events described below are considered to have a potential for disrupting program operations and increasing error rates to an extent that relief from a resulting liability or increased liability is appropriate. The occurrence of an event(s) does not automatically result in a determination of good cause for an error rate in excess of the national performance measure. The State agency must demonstrate that the event had an adverse and uncontrollable impact on program operations during the relevant period, and the event caused an uncontrollable increase in the error rate. Good cause relief will only be considered for that portion of the error rate/liability attributable to the unusual event. The following are unusual events which State agencies may use as a basis for requesting good cause relief and specific information that must be submitted to justify such requests for relief:

(A) Natural disasters such as those under the authority of the Stafford Act of 1988 or civil disorders that adversely affect program operations.
(B) Strikes by State agency staff necessary to determine SNAP eligibility and process case changes.

(C) A significant growth in SNAP caseload in a State prior to or during a fiscal year, such as a 15 percent growth in caseload. Caseload growth which historically increases during certain periods of the year will not be considered unusual or beyond the State agency's control.
(D) A change in the SNAP or other Federal or State program that has a substantial adverse impact on the management of the SNAP of a State. Requests for relief from errors caused by the uncontrollable effects of unusual program changes will be considered to the extent the program change is not common to all States.
(E) A significant circumstance beyond the control of the State agency. Requests for relief from errors caused by the uncontrollable effect of the significant circumstance will be considered to the extent that the circumstance is not common to all States, such as a fire in a certification office.

29.4 RESOLUTION OF LIABILITIES

FNS may:

(A) Waive all or a portion of the liability;
(B) Require the State agency to reinvest up to 50 percent of the liability in activities to improve program administration, which new investment money will not be matched by Federal funds;
(C) Designate up to 50 percent of the liability as “at-risk” for repayment if a liability is established based on the State agency's payment error rate for the subsequent fiscal year; or
(D) Assert any combination of these options.

Once FNS establishes its proposed liability resolution plan, the amount assigned as at-risk is not subject to settlement negotiation between FNS and the State agency and may not be reduced unless an appeal decision revises the total dollar liability. FNS and the State will settle any waiver amount or reinvestment amount before the end of the federal fiscal year in which the liability amount is determined unless an administrative appeal relating to the claim is pending. If a State agency appeals its liability determination, if the State agency began required reinvestment activities prior to an appeal determination, and if the liability amount is reduced to $0 through the appeal, FNS will pay to the State agency an amount equal to 50 percent of the new investment amount that was included in the liability amount subject to the appeal. If FNS wholly prevails on a State agency's appeal, FNS will require the State agency to invest all or a portion of the amount designated for reinvestment during the appeal to be reinvested or to be repaid to the Federal government.

Chapter 30 High Performance Bonuses

30.1 GENERAL RULE

USDA, FNS will award bonuses totaling $48 million for each fiscal year to State agencies that show high or improved performance. FNS will award the bonuses no later than September 30th of the federal fiscal year following the performance measurement year.

A State agency is not eligible for a bonus payment in any fiscal year for which it has a liability amount established as a result of an excessive payment error rate in the same year. If a State is disqualified from receiving a bonus payment, and the State is not tied for a bonus, the State with the next best performance will be awarded a bonus payment. The determination whether, and in what amount, to award a performance bonus payment is not subject to administrative or judicial review.

A State cannot be awarded two bonuses in the same category (See section. If a State is determined to be among the best and the most improved in a category, it will be awarded a bonus only for being the best. The next State in the best category will be awarded a bonus as being among the best States. Where there is a tie to the fourth decimal point, FNS will add the additional State(s) into the category and the money will be divided among all the States.

In determining the amount of the award, FNS will first award a base amount of $100,000 to each State agency that is an identified winner in each category. Subsequently, FNS will divide the remaining money among the States in each category in proportion to the size of their caseloads (the average number of households per month for the federal fiscal year for which performance is measured).

30.2 PERFORMANCE MEASURES

FNS will measure performance by and base awards on the following categories of performance measures:

(1) Payment accuracy

FNS will divide $24 million among the 10 States with the lowest and the most improved combined payment error rates as specified:

(A) Excellence in payment accuracy. FNS will provide bonuses to the 7 States with the lowest combined payment error rates based on the validated quality control payment error rates for the performance measurement year.
(B) Most improved in payment accuracy. FNS will provide bonuses to the 3 States with the largest percentage point decrease in their combined payment error rates based on the comparison of the validated quality control payment error rates for the performance measurement year and the previous fiscal year.

(2) Negative error rate

FNS will divide $6 million among the 6 States with the lowest and the most improved negative error rates as specified:

(A) Lowest negative error rate. FNS will provide bonuses to the 4 States with the lowest negative error rates based on the validated quality control negative error rates for the performance year.
(B) Most improved negative error rate. FNS will provide bonuses to the 2 States with the largest percentage point decrease in their negative error rates, based on the comparison of the performance measurement year's validated quality control negative error rates with those of the previous fiscal year. A State agency is not eligible for a bonus under this criterion if the State's negative error rate for the fiscal year is more than 50 percent above the national average.

(3) Program access index (PAI)

FNS will divide $12 million among the 8 States with the highest and the most improved level of participation as determined in (C) below. The PAI is the ratio of participants to persons with incomes below 125 percent of poverty.

(A) High program access index. FNS will provide bonuses to the 4 States with the highest PAI.
(B) Most improved program access index. FNS will provide bonuses to the 4 States with the most improved PAI.
(C) Determining the PAI. For the number of participants (numerator), FNS will use the administrative annual counts of participants minus new participants certified under special

disaster program rules by State averaged over the calendar year. For the number of people below 125 percent of poverty (denominator), FNS will use the Census Bureau's March Supplement to the Current Population Survey's (CPS) count of people below 125 percent of poverty for the same calendar year. FNS will reduce the count in each State where a Food Distribution Program on Indian Reservations (FDPIR) program is operated by the administrative counts of the number of individuals who participate in this program averaged over the calendar year. FNS will reduce the count in California by the Census Bureau's percentage of people below 125% of poverty in California who received Supplemental Security Income in the previous year.

FNS reserves the right to use data from the American Community Survey (ACS) in lieu of the CPS, and to use the count of people below 130 percent of poverty, should these data become available in a timely fashion and prove more accurate. Such a substitution would apply to all States. (ii) *Timely processed applications.* A timely processed application is one that provides an eligible applicant the "opportunity to participate" as defined in §274.2 of this chapter, within thirty days for normal processing or 7 days for expedited processing. New applications that are processed outside of this standard are untimely for this measure, except for applications that are properly pended in accordance with §273.2(h)(2) of this chapter because verification is incomplete and the State agency has taken all the actions described in §273.2(h)(1)(i)(C) of this chapter. Such applications will not be included in this measure. Applications that are denied will not be included in this measure.

(4) Application processing timeliness

FNS will divide $6 million among the 6 States with the highest percentage of timely processed applications. A timely processed application is one that provides an eligible applicant the "opportunity to participate" within thirty days for normal processing or 7 days for expedited processing. New applications that are processed outside of this standard are untimely for this measure, except for applications that are properly pended because verification is incomplete and the State agency has taken all the necessary actions will not be included in this measure. Applications that are denied will not be included in this measure. Only applications that were filed on or after the beginning of the performance measurement (federal fiscal) year will be evaluated under this measure. FNS will use quality control data to determine each State's rate of application processing timeliness.

Chapter 31 Federal Tax Information

31.1 GENERAL INFORMATION

Federal Tax Information (FTI) is received by the Agency as a requirement of the Deficit Reduction Act of 1984 which mandates the implementation of the Income and Eligibility Verification System (IEVS). This act requires states to receive and use IEVS for the purpose of administrating financial assistance programs. FTI, received from SSA as Beneficiary Earnings Records (BEER) and from IRS as individual tax information, is made available to eligibility and claims staff through the CHIP system.

Agencies in receipt of FTI have a responsibility to ensure that the information is safeguarded to prevent any unauthorized use or disclosure, and that confidentiality is protected. Workers have a responsibility to safeguard any information to which they have access, intentional or unintentional. This responsibility does not end with the termination of employment from the agency.

31.2 ACCESS TO FEDERAL TAX INFORMATION

FTI is made available through the CHIP system for the purpose of determining eligibility for benefits, and should be accessed only when an employee "needs to know" the FTI information in order to conduct their job.

From the Interface Menu (INME), enter the SSN for an individual whose eligibility is being determined. The Comprehensive Inquiry Menu (COIM) of the CHIP Interface Menu (INME) will provide an indication of the IEVS information available for the CHIP individual. If the CHIP individual has either BEER or IRS data, this information will be indicated as **Federal Information—B** or **Federal Information—I**. The BEER or IRS screens are available on CHIP to supervisory and claims staff, and eligibility staff should request this information from the county-designated source. The information found on BEER or IRS should not be copied, scanned, or transmitted through any electronic means such as email, fax, etc.

The information provided by IRS is <u>lead information</u> only. Verification and documentation is needed before the information can be used for any budget changes or other case action is processed. Any requests for verification from a third party should make no reference to the

method of discovery. Suspense copies and cover sheets of verification requests are also considered FTI until the verification is received, and these copies should be destroyed in accordance with Publication 1075, Section 8.

31.3 TRAINING REQUIREMENTS

Prior to an employee having access to FTI, the supervisor is responsible for ensuring the employee has completed the IRS.gov on-line training course, Disclosure Awareness Training for State Human Services Agencies, has read and understands the annual directive memo (D-12-17 dated 12/18/12) regarding FTI and has signed the Employee Certification of Understanding. An employee's job title determines to what FTI information the employee has access.

An annual review of the on-line training course by all staff having access is required, along with the Certification of Employee Understanding. The Employee Certification forms should be made a part of an individual's personnel record and/or kept in the possession of the supervisor or HR representative. Verification of compliance to the training requirements is a part of any audit pertaining to FTI. The worker accessing the FTI is responsible for safeguarding it. FTI in any form should be kept out of view from anyone not actively involved in the case decision. FTI should not be copied, scanned, faxed, or emailed.

31.4 REQUIREMENT TO AVOID UNAUTHORIZED ACCESS

A key requirement of accessing FTI is that the person in receipt must have a "need to know." Computer screens must be turned away from view of all passersby. Any materials which may pertain to FTI must be out of view. The clean desk policy should apply at all times. If a worker leaves a work station, the computer should be locked.

If any FTI is inadvertently printed, the item(s) should be immediately recorded on an FTI destruction log and shredded in accordance with the requirements of Publication 1075, section 8.3. Any materials relating to FTI which are discovered in SCOSA folders should immediately be destroyed. This would include any screen prints of BEER or IRS data, suspense copies of verification requests, and returned cover letters requesting verification.

As a part of the federal recordkeeping requirements for FTI, an electronic record is maintained of each SSN entered into the CHIP Inquiry menu, the case number associated to the SSN, the USERID of the person requesting the information, and a date/time stamp is applied. A review of this record is part of each SCDSS Safeguards Review by IRS.

FTI should not be released to **anyone**, including attorneys, officers of the court, legislative representatives, or authorized representatives.

31.5 REPORTING OF IMPROPER DISCLOSURES

Immediately upon discovering a possible improper inspection or disclosure of FTI, including breaches and security incidents, by a state employee or any other person, the individual making the observation or receiving information should contact the office of the appropriate Special Agent-in-Charge, Treasury Inspector General for Tax Administration (TIGTA) and the IRS. The TIGTA Field Division in Atlanta must be contacted at: (404) 338-7449.

Mailing Address:	Treasury Inspector General for Tax Administration Ben Franklin Station PO Box 589 Washington, DC 20044-0689
Hotline Number:	1-800-589-3718
Web Site:	http://www.treasury.gov/tigta

Notification Process: Simultaneously to notifying TIGTA, the agency must notify the IRS Office of Safeguards. To notify the IRS Office of Safeguards, the agency should document the specifics of the incident known at that time into a Data Incident Report, including but not limited to:

- Name of agency and agency point of contact for resolving data incident with their contact information.
- Date and time of the incident
- Date and time the incident was discovered
- How the incident was discovered
- Description of the incident and the data involved. Include specific data elements, if known
- Potential number of FTI records involved. If unknown, provide a range, if possible.
- Address where the incident occurred
- Information technology involved (example: laptop, server, mainframe)
- Do not include any FTI in the Data Incident report.
- Email the Data Incident Report to the SafeguardReports@IRS.gov mailbox. Reports should be sent electronically and encrypted via IRS approved encryption techniques. Use the term "Data Incident Report" in the subject line of the email.

Note: Timely notification is the most important factor, not the completeness of the Data Incident Report. Additional information will be secured via conversations with the Office of Safeguards. The agency will contact TIGTA and the IRS immediately, but no later than 24-hours after identification of a possible issue involving FTI. The agency should not wait to conduct an internal investigation to determine of FTI was involved. If FTI may have been involved, the agency must contact TIGTA and the IRS immediately.

Source: Quoted from Sections 10.1, 10.2 and 10.3 of Publication 1075, which is available in its entirety on-line at irs.gov.

31.6 PENALTIES FOR UNAUTHORIZED DISCLOSURES

Improper access or disclosure of FTI can result in a felony conviction, punishable by a fine up to $5000 and imprisonment up to 5 years, as well as civil penalties. Unauthorized inspection of FTI can result in a misdemeanor penalty of up to $1000 and/or up to 1 year imprisonment, as well as civil penalties.

Any unauthorized inspection of FTI will be reported to the individual to whom the information belongs. That individual will have the discretion of seeking retribution from the person for the unauthorized access to their personal tax information.

Any questions relating to the handling of Federal Tax Information should be directed to the CHIP Helpdesk Monitors.

SNAP Tool Kit

1: Accommodation Assessment for LEP Clients

2: Important Points for LEP/SI Clients

3: Permanent Disability Established by the Social Security Act

4: Acceptable Verification of Alien Eligibility

5: SNAP Annual Recertification Chart

6: SNAP Six month Recertification Chart

7: SNAP 2 WORK Referral Guide

8: National Directory of Contacts

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1: Accommodation Assessment for LEP Clients

DSS 2664 INSTRUCTIONS and TRAINING GUIDE

PURPOSE

The DSS 2664 should be completed at initial contact with any client who possibly requires special accommodations (speaks little or no English, is hearing impaired, visually impaired, or has special physical needs). An interpreter should be used to assist in the assessment if there is any question at all regarding the client's language proficiency.

Client's Name - *Clearly print the client's name as it appears on DSS forms and in electronic file systems such as economic services (CHIP) or human services (CAPSS) computer systems. You will assess only* ***one*** *client per form. Families with more than one LEP/SI member who needs to be assessed will require a separate form for each member.*

Program & ID# - *Write the program name (FS, FI, CPS, APS, etc.) and the case number. For economic services cases, complete an Accommodation Assessment on the head of household or the person you are interviewing. If the client elects to have an Authorized Representative who is LEP or SI, an assessment must also be completed on that person. For human services cases, a separate Accommodation Assessment must be completed on each family member who is possibly LEP or SI.*

I. *FOREIGN LANGUAGE*

Primary Language: *Write the client's primary language such as Spanish, Hindi, or Vietnamese.*

Country of Origin: *Write the name of the country the client is from and, if the country is large, the region or city the client is from such as Oaxaca, Mexico, or Jaipur, India.*

Does the client speak and understand English, including specialized words and phrases used by DSS and related agencies, well enough to communicate with you without the aid of an interpreter? ___Yes ___No
When assessing English listening and speaking, it isn't sufficient to know if the client is able to carry on a basic social conversation with you. DSS interviews use vocabulary that relate to financial and investment matters, insurance, landlord information, and other topics not ordinarily discussed by immigrants. The client's ability to use the vocabulary and the grammatical structures necessary to listen, understand, and express responses is what you must assess. If there is any doubt that the client can FULLY understand and express him or herself to give or ask for information, then an interpreter is needed. It is incumbent upon the worker, not upon the client, to provide the access to give and obtain accurate information.

If the answer is Yes, the client does speak and understand English, please explain briefly how you determined this? _____
_____

Examples might be that the client is able to explain to you what child support, the cash value of life insurance, or child custody is. That client may have been in the US for a number of years and has previously been involved in DSS cases or may have worked for a company using English as his or her primary mode of communication.

Does the client read English well enough to understand DSS notices and forms without the aid of translated materials?
The same holds true for the oral instructions above but with the focus on the client's English reading ability. While rare, a client may be able to speak and understand English well enough not to need an interpreter, but may not have the ability to read it well enough to understand DSS letters and notices. Therefore, accommodation will be required.

If you answer "YES" to these questions, the client is NOT LEP. File the form in the case to indicate that the assessment was done.

Does the client read and write in his or her primary language?
Some LEP clients may not read in their native languages. It is necessary to assess that similarly to assessing for learning disabilities in English-speaking clients so that you can follow up on written communications. You will still have their letters and notices translated, however.

Accommodations:
___Bilingual worker or Interpreter ___Translated materials ___Other
Check off the accommodations this client will need and write in any additional things you think are pertinent. Do not write the name of the interpreter you plan to use because that could change. The accommodations checked should be based on the information given in the questions above regarding the client's ability to understand English (oral and written) well. In most cases if an interpreter is needed then translated documents would be needed also and vice versa.
NOTE: Friends, family members, and authorized representatives are not qualified interpreters and are not acceptable accommodations under DSS Policy.

II. HEARING *LOSS*

Primary Language:
___Sign Language ___English ___Other _____
Indicate the primary language of the deaf or hard of hearing client. Only one block should be checked. This may be American Sign Language, English (for those who lost hearing later in life), or a foreign language such as Spanish or Korean.

Does the client have average reading and writing skills at a 10th grade level?
The younger a person is when hearing is lost, the more profound effect it has on learning to read and write English. Even a deaf person with a high school education may have much difficulty with English.
Write three questions for your client to answer unaided such as:
"What is the highest grade you completed in school?"
"What is your problem and what kind of assistance do you need today?"
"What sources of income do you have and how much do you receive from each source?"
If the client can read these questions and answer them appropriately, then he or she probably reads well enough to (a) write notes if an interpreter isn't available or if the client doesn't use sign language, (b) understand most of

DSS's applications and notices. If the answers aren't correct or if they don't fit the questions, the answer is "no" and you will need to make accommodations such as going over applications and forms with an interpreter to assist.

Is the client skilled at lip-reading?
This means, "Is lip-reading the client's regular means of communication?" A skilled lip reader or speech reader will be very rare. Some deaf people who use sign language can lip-read some words and phrases, but this doesn't mean that they can accurately read entire conversations. The more English the deaf person knows or the more hearing the person has or has had in the past, the better chance that person has to lip-read accurately since they understand the vocabulary and structure of English. Those that have never heard English often lip-read only things that they can predict according to the situation, such as Hello, How are you?, Sorry, Goodbye, No, Yes, or Thank you.

Is client both deaf and blind?
Some people are both deaf and blind. Many have a congenital disease called Usher Syndrome, which causes them to be born deaf and then begin to lose their sight as they grow older, most commonly between ages of 16 and 30. These people usually use American Sign Language that is signed in their hands so they can feel the signs. They often do not read Braille, but they may if they lost their sight early and became involved with the Commission for the Blind.
Accommodations for clients who are deaf-blind would be to use a sign language interpreter for interviews and, for written correspondence, to make an office or home visit to explain letters through an interpreter.

Accommodation for Face-to-Face:
___SL Interpreter ___Note-writing ___Face the Client
Anyone whose primary language is American Sign Language should have an interpreter as an accommodation. The only exception I can think of is one where the client does not want an interpreter AND the worker is 100% certain that full access is accomplished through note-writing or some other means (i.e., "YES" to whether or not the client has a 10th grade reading and write level). This means both in obtaining information from the client and in giving information to the client. Note-writing would be appropriate for people whose first language is English but who do not lip-read such as a deaf person who lost her hearing as an adult but did not learn to sign. Face the client while interviewing a person who lip-reads.

Accommodation for Written:
___OV/HV with interpreter ___Simplified letters ___None ___Video Relay
You may accommodate clients who can't read sufficiently because of their deafness through office visits (OV) or home visits (HV) to explain the contents of the letters. You may also choose to simplify the letter greatly and send the easier to read version to the client IF the client does have some basic reading skills. It is still good to follow up with a call to see if the client has questions. A visit may still be necessary until you get the hang of writing to a deaf person. Avoid idioms, DSS jargon, long sentences, and big words. Check one or both. If the client's first language is English or if the signing client has good reading skills, you may check 'None'. The BEST accommodation for written is to follow your letter with a call through a Video Relay service. The Deaf client must have Video Relay equipment in their home to use this service. Which service will depend on the Deaf client's choice. This is the best choice because it uses an actual sign language interpreter to interpret what is said and the Deaf person can see the interpreter on the TV screen. The interpreter can see the client and tell you what she/he is signing.

Accommodation for the Telephone: ___TTY / Relay ___Give no critical information by TTY or Relay
___Video Relay

The TTY and the Relay operator are not interpreters. You are using English on the phone so this is equal to note-writing. Keep it simple. Unless this client's first language is English, do not interview the client on the TTY or through Relay. You may check one or both. For information on Video Relay, see the section above.

III. *VISION LOSS*

Accommodation:
___Read to client ___Enlarged print ___Braille ___On tape
Check all that apply. Most clients will probably prefer that the worker read information to them or enlarge print for them. You can have things Brailled or recorded to provide to the client at a later date. Clients can usually sign documents for themselves if you indicate where the line is by putting your index fingers at the beginning and ending of the line. Don't worry if they miss.

IV. *PHYSICAL NEEDS*

___Wheelchair ___Walking difficulty ___Speech problem ___Other

Check which is appropriate.

Accommodations: ___HV ___Special location ___Relay ___Other
Check which is appropriate.

Interpreter used for assessment: _____
Print the name of the interpreter who assisted with the assessment. The only time you might not use an interpreter is when the client does speak good enough English to do an accurate assessment, even if you find that the client will need an interpreter for interviews. For HABLA or Language Line, it is not necessary to have the individual interpreter's name. Just put the company name.

Assessment by: _____ Date: _____
Print your name and date of the assessment.

Original filed in case record, copy sent to CSSC_____ Case file color-coded _____

Check off to confirm that you sent a copy to the CSSC and that the form was scanned into SCOSA.

NOTE: If the assessment determines that the individual is not LEP/SI and requires no special accommodations the DSS 2664 is scanned into SCOSA to document that an assessment was completed, but a copy is not sent to the CSSC. Because the individual is not LEP/SI, the name will not be entered into the client database.

Revised May 17, 2011

2: Important Points for LEP/SI Clients

Economic Services
Basic Training Handout
Revised 5-17-11

NOTE: This handout should be helpful as a quick reference tool for common questions and situations. You should always refer to program manuals for guidance on policy and procedures.

Client Special Services Coordinator (CSSC)

Each county has a CSSC who is available to assist workers who need guidance or help in serving clients with special needs or accommodations. Your supervisor will know who is assigned those duties in your county.

DSS 2664, Accommodation Assessment

1. The DSS 2664 is a one time/one person use form. It should be completed at the first contact with an individual and is not completed again unless there is some major change in the individual's circumstances. DSS 2664's should be scanned into the LEP/SI folder in SCOSA.

2. An assessment is generally required only on the Head of Household. However, in some instances there is another LEP/SI adult household member or Authorized Representative who comes in sometimes for interviews; in that case a DSS 2664 should be completed on that individual also.

3. Complete all sections of the DSS 2664 that are applicable. Include the worker's name and date. Also, include the name of the interpreter if one was used for the assessment.

4. The designation of an Authorized Representative is not considered as an accommodation for face to face, written or telephone contacts.

5. If a deaf client doesn't know American Sign Language (ASL), the worker should state that specifically on the DSS 2664 along with showing English as the Primary Language. Otherwise, it may appear that note writing or lip reading is being used when the preferable method of communication is ASL. While there are some deaf individuals who do not know sign language, most are skilled in ASL.

Interpreters

1. Qualified interpreters must be used for all contacts. ES workers should use HABLA for all Spanish speakers and Language Line for other languages. Also, ES workers may use qualified contracted interpreters by telephone for languages other than Spanish or for Spanish speakers when HABLA is not available. There may also be special circumstances when a face-to-face interpreter is needed for Economic Services cases.

2. Employees who have received qualified bilingual worker status (passed Oral Proficiency Interview test) may communicate with LEP clients one-on-one without use of an interpreter. Unless the employee has

completed the entire interpreter qualification process to be an interpreter, he/she may not interpret for another worker.

3. Authorized Representatives may not be interpreters. Anytime the client participates in an interview, a qualified interpreter must be used.

4. A client must have an interpreter provided when the Authorized Representative designation is made or the designation must be made on a form (3800 or 1632) in the client's primary language. At the designation the client should be advised that he/she may choose to be interviewed himself at any time and that an interpreter will be provided. The assignment of an AR is not an accommodation.

5. An interpreter may not contact a client without the worker being involved in the conversation.

6. If a deaf client's language is American Sign Language (ASL), use an ASL interpreter from the SC School for Deaf and Blind or from the alternate interpreter list provided by the Office of Civil Rights. Note-writing should be used only in special circumstances or for brief visits such as when the client brings requested information to the office. If note-writing is used, the notes should be detailed enough to show the client's complete understanding of the information requested and provided. The notes must be scanned into SCOSA.

7. In most cases, workers should use an interpreter for the accommodation assessment and should note the name in the designated blank on the DSS 2664. If it is obvious that the client speaks little or no English the worker may make the assessment without the assistance of an interpreter.

8. ES workers should document the use of an interpreter in Folder Notes with the action to which it pertains. When using HABLA, Language Line or Relay note the name of the service; the interpreter's name is not necessary. Do not use the DSS 2664 to document use of an interpreter.

9. Front office staff must be prepared to use HABLA and Language Line. Individuals with the client should not be used to communicate with the client.

Translated Materials

1. All forms or notices given or mailed to a client must be translated. Copies of translated correspondence should be in SCOSA along with the English version. The following should be used for documentation of translated letters and notices. The fax cover sheet or other communication showing that the document was sent for translation and the English document should be imaged in the section to which it pertains. Once the translated document is received it should be scanned into the folder with the action it pertains to as well. Also, document on the translated document the date the document was sent or given to the client.

2. Fair Hearing Information, DSS Form 2418, in the client's language must be attached to each translated CHIP notice. Translated copies are on the Master Forms Index (MFI).

3. For Spanish speaking clients, all translations must go to HABLA. Translations for languages other than Spanish should be sent to a private certified translator or to a service such as Language Line. CSSC's can locate certified translators for languages other than Spanish on the web or may contact Individual and Provider Rights

for assistance. Most forms and brochures are translated into Spanish and are available in the Forms Index. The form numbers are the same as the English versions but are followed by SPA.

4. Interpreters may explain forms/ notices immediately and then the worker must get a translated copy to the client as soon as possible. For languages other than Spanish, it is not necessary to have the document translated if it is being given to the client in person with an interpreter available to explain the document. Regardless of the language, all notices/forms provided only through the mail must be translated. The Master Forms Index (MFI) contains the Spanish translations of most forms as well as translations in other languages for some forms. Always check the MFI prior to sending a form for translation.

5. Some CHIP notices are sent automatically in Spanish if the "Interpreter For" field on the 'INRD" screen is coded "SP". These are only those notices that are automatically generated by CHIP and require no entry by the worker (X notices). All other CHIP notices are the worker's responsibility.

6. State Office will mail a Spanish version of the 3807A to each client whose case is coded as "SP" in the "Interpreter For" field on the CHIP INRD Screen. However, for a client who speaks a language other than Spanish the county is responsible for mailing the 3807A in the client's language. When it is necessary for a worker to mail a translated 3807A to the client, document on the translated 3807A the date the county is mailing the form to the recipient before scanning the form.

Coding

Workers should code the "Interpreter For" field on the INRD Screen in CHIP based on the language of the Head of Household. The available codes are: CH (Chinese), RU (Russian), SL (Sign Language), SP (Spanish), VN (Vietnamese), and OT (Other). The "OT" code is for any foreign language that does not have a specific code. This field is only for language codes; it is **not** used to document disabilities or other accommodations. For example, no code should be entered if a client is hard of hearing but doesn't use Sign Language. Also, no code should be entered if a client is Hispanic but is determined to speak and read English well enough to not require an interpreter or translated materials.

3: Permanent Disability Established by the Social Security Act

When making the disability determination for some individuals specified in **Section 5.1 Verification Prior to Certification, (5)** *Disability*, the Agency must use criteria for permanent disability established by the Social Security Act**.** Those criteria are:

- Permanent loss of use of two limbs or amputation of leg or hip, leg or foot due to diabetes or poor circulation, or limb of an individual aged 55 or older;
- Spinal cord or nerve root lesions resulting in paraplegia or quadriplegia;
- Multiple Sclerosis;
- Muscular Dystrophy;
- Impaired renal function due to chronic renal disease;
- Chronic liver disease resulting in massive hemorrhage or requiring a shunt operation;
- Total deafness, not correctable;
- Statutory blindness, except if due to cataracts or detached retina;
- Markedly reduced vision not correctable by surgery or glasses;
- IQ of 59 or less, established after attaining age 16;
- Psychiatric impairments which have required institutionalization in a licensed mental hospital for the past two years without release that would indicate improvement;
- Age 59 and older with any condition (physical and/or mental) listed below:
    - Amyothropic lateral sclerosis
    - Anterior poliomyelitis
    - Arteriosclerosis obliterans or thromboangitis
    - Arthritis of major weight bearing joint
    - Arthritis of one major joint in each of the upper extremities
    - Central nervous system vascular accident
    - Cerebral palsy
    - Chronic obstruction airway disease
    - Chronic venous insufficiency
    - Degenerative disease
    - Diabetes mellitus
    - Diffuse pulmonary fibrosis
    - Disorders of the spine
    - Organic loss of speech
    - Other restrictive ventilatory disorders
    - Parkinson Syndrome
    - Scleroderma or progressive systemic sclerosis
    - Subacute combined cord degeneration
    - Syringomyllia
    - Tabes dorsalis

4: Acceptable Verification of U.S. Citizenship and Alien Eligibility

Acceptable Verification of U.S. Citizenship

Verification of U.S. citizenship is not required unless U.S. citizenship is questionable. If citizenship is questionable, the following documents may be used to verify U.S. citizenship:

Acceptable Verification of U.S. Citizens and U.S. Non-Citizen Nationals
▪ **Birth certificate showing birth in one of the 50 States, the District of Columbia, Puerto Rico (on or after 01/13/1941), Guam, the U.S. Virgin Islands (on or after 01/17/1917), American Samoa, Swain's Island, or the Northern Mariana Islands, unless the person was born to foreign diplomats residing in the U.S.** **Note: Citizens of the Marshall Islands, Micronesia, and Palau are not eligible for federal public assistance.** ▪ **United States passport (except limited passports)** ▪ **Report of birth abroad of a U.S. Citizen (FS-240)** ▪ **Certification of birth (FS-545) or Certification of Report of Birth (DS-1350)** ▪ **Certificate of Naturalization (N-550 or N-570)** ▪ **Certificate of Citizenship (N-560 or N-561)** ▪ **United States Citizen Identification Card (I-197, formerly Form I-179)** ▪ **Northern Mariana Identification Card** ▪ **Statement from a U.S. consular officer certifying that the individual is a U.S. citizen** ▪ **American Indian Card with a classification code "KIC" and a statement on the back**

Others Who Are Eligible on the Same Basis as U.S. Citizens	
Category	**Verification**
An American Indian born in Canada who possesses at least 50 per centum of blood of the American Indian race to whom the provisions of the Immigration and Nationality Act apply	▪ **INS Form I-551 with code S13 OR** ▪ **Unexpired temporary I-551 stamp in Canadian passport or on INS Form I-94 with code S13 OR** ▪ **Letter or other tribal document certifying at least 50 per centum American Indian blood, as required by INA Section 289, combined with a birth certificate or other satisfactory evidence of birth in Canada.**
An individual who is lawfully residing in the U.S. and was a member of a Hmong or Highland Laotian tribe at the time that the tribe rendered assistance to U.S. personnel by taking part in a military or rescue operation during the Vietnam era (beginning August 5, 1964, and ending May 7, 1975). • The spouse of such Hmong or Highland Laotian who is deceased, or • An unmarried dependent child of such Hmong or Highland Laotian who is under the age of 18 or if a full-time student under the age of 22; • An unmarried child under the age of 18 or if a full time student under the age of 22 of such a deceased Hmong or Highland Laotian provided the child was dependent upon him or her at the time of his or her death; or • An unmarried disabled child age 18 or older if the child was disabled and dependent on the person prior to the child's 18th birthday	**Contact Economic Services (ES) Policy Unit for assistance if an applicant indicates that he/she falls into this category.**
A member of an Indian tribe as defined in Section 4(e) of the Indian Self-determination and Education Assistance Act which is recognized as eligible for the special programs and services provided by the U.S. to Indians because of their status as Indians.	• **Membership card or other tribal document demonstrating membership in a federally-recognized Indian tribe under section 4(e) of the Indian Self-Determination and Education Assistance Act** OR • **Contact with tribal government for confirmation of the individual's membership**

Acceptable Verification of Alien Eligibility

The Agency must verify the eligible status of applicant aliens according to **Section 5.1 Verification Prior to Certification, (6) *Alien Eligibility*** and **Section 7.3 Citizenship and Alien Status.** The following tables can be used for acceptable sources of verification. **The validity of these documents must also be verified in the SAVE database.**

Common INS documents that will be referred to throughout the following charts as acceptable forms of verification are:

I-94: Arrival Departure Record
I-151: Alien Registration Receipt Card
I-551: Resident Alien Card or Alien Registration Record Card; commonly known as a "*green card*"
I-571: Refugee Travel Document
I-688B: Employment Authorization Card
I-766: Employment Authorization Document

Qualified Non-Citizens Who Do Not Have To Meet Additional Non-Citizen Conditions to Be Eligible	
Category	**Acceptable Verification**
Amerasians	• INS Form I-551 with code AM6, AM7, or AM8 • Unexpired temporary I-551 stamp in foreign passport or on INS Form I-94 with the code AM1, AM2, or AM3
Asylees	• INS Form I-94 annotated with stamp showing admission under Section 208 of INA • INS Form I-688B annotated with 274A.12(a)(5) • INS Form I-766 annotated A5 • Grant Letter from the Asylum Office of INS • Order of an immigration judge granting asylum
Cuban or Haitian Entrants	• INS Form I-551 with the code CU6, CU7, or CH6 • Unexpired temporary I-551 stamp in foreign passport or on INS Form I-94 with the code CU6 or CU7 • INS Form I-94 with stamp showing parole as Cuban/Haitian Entrant
Deportation (or Removal) Withheld	• INS Form I-688B annotated 274a.12(a)(10)

Qualified Non-Citizens Who Do Not Have To Meet Additional Non-Citizen Conditions to Be Eligible	
Category	**Acceptable Verification**
	• INS Form I-766 annotated A10 • INS Form I-94 • Order of an immigration judge showing deportation withheld under Section 243(h) of INA as in effect prior to April 1, 1997, or removal withheld under Section 241(b)(3) of the INA
Iraqi and Afghan Special Immigrants	**Contact the ES Policy Unit for Assistance**
Lawfully Admitted for Permanent Residence (LPRs) with 40 Qualifying Work Quarters From Spouse or Parents *Description:* *Aliens age 18 or older lawfully admitted for permanent residence under the INA who have 40 qualifying quarters as determined under Title II of the SSA, including qualifying quarters of work not covered by Title II of the SSA, based on the sum of:* • *quarters the alien worked* • *quarters credited from the work of a parent of the alien before the alien became 18 (including quarters worked before the alien was born or adopted); and* • *quarters credited from the work of a spouse of the alien during their marriage if they are still married or the spouse is deceased*	• INS Form I-551 or INS Form I-151 with verification of qualifying hours through Quarters of Coverage History System (QCHS) • Unexpired Temporary I-551 stamp in foreign passport or on INS Form I-94 with verification of qualifying hours through QCHS
Refugees	• INS Form 1-551 with the code RE6, RE7, RE8, RE9 • INS Form I-94 annotated with stamp showing admission under Section 207 of INA • INS Form I-688B annotated 274a.12(a)(3) • INS Form I-766 annotated A3 • INS Form I-571
Trafficking Victims	• Letter from the Department of Health and Human Services certifying that the individual is a victim of trafficking • INS Form I-551 with code SU6

Qualified Non-Citizens Who May Be Eligible if They Have Been in the Below Status for at Least Five (5) Years	
Category	**Acceptable Verification**
Lawfully Admitted for Permanent Residence (LPR)	• INS Form I-551 or INS Form I-151 • Unexpired Temporary I-551 stamp in foreign passport or on INS Form I-94
Conditional Entrants	• INS Form I-94 with stamp showing admission under Section 203(a)(7) of INA • INS Form I-688B annotated 274a.12(a)(3) • INS Form I-766 annotated A3
Parolees	INS Form I-94 with stamp showing admission for at least one year under Section 212(d)(5) of the INA
Battered Non-Citizens *Description:* *Aliens who have been battered or subjected to extreme cruelty in the U.S. by a spouse or a parent or by a member of the spouse or parent's family residing in the same household as the alien at the time of the abuse, an alien whose child has been battered or subjected to battery or cruelty, or an alien child whose parent has been battered.*	• INS Form I-551 with one of the following INS class of admission (COA) codes printed on the front of a white card or the back of a pink card demonstrates approval of a petition: AR1, AR6,C20 through C29, CF1, CF2, CR1, CR2, CR6, CR7, CX1 through CX3, CX6 through CX8, F20 through F29, FX1 through FX3, FX6 through FX8, IF1, IF2, IR1 through IR4, IR6 through IR9, IW1, IW2, IW6, IW7, MR6, MR7, P21 through P23, or P26 through P28 • INS Form I-551 with one of the following COA codes stamped on the lower left side of the back of a pink card demonstrates approval of a petition: IB1 through IB3, IB6 through IB8, B11, B12, B16, B17, B20 through B29, B31 through B33, B36 through B38, BX1 through BX3, or BX6 through BX8 • INS Form I-551 with COA code Z13 may demonstrate approval of a petition • Unexpired temporary I-551 stamp in foreign passport or on INS Form I-94 with one of the above COA codes • INS Form I-797 indicating approval of an INS I-130 petition (only I-130 petitions describing the following relationships may be accepted: husbands or wives of U.S. citizens or LPRs,

	unmarried children under 21 years old of U.S. citizens or LPRs, or unmarried children 21 or older of LPRs) or approval of an I-360 petition (only I-360 approvals based on status as a widow/widower of a U.S. citizen or as a self-petitioning spouse or child of an abusive U.S. citizen or LPR may be accepted) • A final order of an immigration judge or the Board of Immigration Appeals granting suspension of deportation under section 244(a)(3) of the INA as in effect prior to April 1, 1997 or cancellation of removal under section 240A(b)(2) of the INA • INS Form I-797 indicating that the applicant has established a prima facie case • An immigration court or Board of Immigration Appeals order indicating that the applicant has established a prima facie case for suspension of deportation under INA section 244(a)(3) as in effect prior to April 1, 1997 or cancellation of removal under section 240A(b)(2) of the INA • INS Form I-797 indicating that the applicant has established a prima facie case • An immigration court or Board of Immigration Appeals order indicating that the applicant has established a prima facie case for suspension of deportation under INA section 244(a)(3) as in effect prior to April 1, 1997, or cancellation of removal under section 240A(b)(2) of the INA

If the non-citizen has been in one of the above categories for less than five (5) years, he/she must meet one (1) of the criteria in the following chart, in addition to the criteria above, in order to be eligible.

Additional Criteria that Qualified Non-Citizens in the Above Chart Must Meet if They Have Not Been in the Qualifying Status For At Least 5 Years. **The Non-Citizen Must Meet One of the Below Criteria in Addition to One in the Chart Above.**		
Category		**Acceptable Verification**
Blind or Disabled		• Verification of receipt of one of the following: o SSI o Interim Assistance pending SSI o Social Security Disability o Federal or State disability retirement benefits for a **permanent disability** o Disability-related Medicaid o State or Federally administered supplemental benefits as described in **Section 5.1(5)(A) Disability** o Disability-related State General Assistance benefits
Children under age18 Lawfully Residing in the U.S.		Any acceptable INS document which verifies lawful residence and that individual is under age 18.
Elderly born on or before 08/22/1931 who lawfully resided in the U.S. on 08/22/1996		INS Form I-151 or INS Form I-551 annotated with Date of Entry on or before 08/22/1996; or Date of Birth on or before 08/22/1931
Military Connection	▪ A veteran who was honorably discharged for reasons other than alien status, who fulfills the minimum active-duty service requirements of 2 or more years of active duty per 38 U.S.C. 5303A(d), including an individual who died in active military, naval or air service	Discharge certificate, DD Form 214, or equivalent document that shows active duty and character of discharge "Honorable"
	▪ An individual on active duty in the Armed Forces of the U.S. (other than for training)	Current Military Identification Card Note*: If Military ID is due to expire within the next year, obtain current Military Orders.*
	▪ The spouse and unmarried dependent children of a person	• Surviving spouse was married within fifteen years after the termination of the period of

	described in 1 or 2 above including the spouse of a deceased veteran who has not remarried, provided the marriage fulfilled the requirements of 38 U.S.C. 1304, and the spouse has not remarried An unmarried dependent child for purposes of this paragraph is: ▪ a child who is under the age of 18 or, if a full-time student, under the age of 22; such unmarried dependent child of a deceased veteran provided such child was dependent upon the veteran at the time of the veteran's death; or ▪ an unmarried disabled child age 18 or older if the child was disabled and dependent on the veteran prior to the child's 18th birthday	service in which the injury or disease causing the death of the veteran was incurred or aggravated; or • Surviving spouse was married for a year or more; or • That a child was born of the marriage, either before or during the marriage
5 Years of Residence		INS Documents from Chart #2 which indicate that the alien has resided in the U.S. for five (5) years

5: SNAP ANNUAL RECERTIFICATION CHART

Timely 1st – 15th Annual recertification form is due June 15th. Client submits form on June 10th. Form is registered with an application date of June 10th. INRD is coded with an interview date of 06/15.	**Able to Reach Client for Interview**	**Complete** No additional verification needed after the interview	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for • interview in SCOSA and document interview when client is reached • Conduct interview, acknowledge interview completion on INRD, and process annual recertification by the last day of the month. ***Example:*** *First and second attempts to contact client are noted in folder notes in SCOSA. Client is reached on the 2nd attempt (06/14) and interview is completed. Actual date of interview is coded on INRD and a Y is also entered to acknowledge interview. All verification needed was submitted with "A" form therefore case is processed by June 30th. Client receives July benefits during regular issuance cycle.*
Timely 1st – 15th Annual recertification form is due June 15th. Client submits form on June 10th. Form is registered with an application date of June 10th. INRD is coded with an interview date of 06/15. First and second attempts to contact client are noted in folder notes in SCOSA. Client is reached on the 2nd attempt (06/14) and interview is completed. Actual date of interview is coded on INRD and a Y is also entered to acknowledge interview. Additional verification is needed to determine eligibility.	**Able to Reach Client for Interview**	**Incomplete** Additional verification needed as a result of the interview	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA and document interview when client is reached • Conduct interview, acknowledge interview completion on INRD. • Send written request for verification or pending notice to client and enter date that verification was requested on INRD in "info requested field" • Client has until the last day of the month or 10 days from the date information was requested (if there are less than 10 days from the date information was requested and the last day of the month) to provide verification and receive a full allotment. ○ If client does not submit verification, recert will auto-deny for "failure to provide verification" (CHIP code FP) and client will have until the end of the following month to provide verification. Benefits will be prorated from the date the verification is received. ***Example #1:*** *EW sends client a pending notice on 06/14. Client submits verification on June 28th. Case must be processed by June 30th to be timely. Client receives July benefits during regular issuance cycle.* ***Example #2:*** *EW forgets to send pending notice to client and does not send it until June 24th. Client must be given at least 10 days to submit verification. Therefore client has until July 4th to submit verification. Since July 4th is a holiday, the* ***verification*** *will be considered timely*

			received if submitted by July 5th. The approval action however is untimely since the delay is agency caused. Client receives a full allotment of July benefits outside of the regular issuance cycle. ***Example #3:*** *EW sends client a pending notice on 06/14. Client* ***does not*** *submit verification by the end of June. Recert auto-denies for "failure to provide information". Client submits verification on July 8th. Benefits are prorated from July 8th.*
Timely 1st – 15th Annual recertification form is due June15th. Client submits form on June 10th. Form is registered with an application date of June 10th. INRD is coded with an interview date of 06/15. Unable to contact client after three attempts. 1st, 2nd and 3rd attempts to contact client are noted in folder notes in SCOSA. Interview is **Not** acknowledged with a "Y" in the interview completed field on INRD, therefore a NOMI is sent to the client.	**Unable to Reach Client for Interview**	**Complete** No additional verification needed after the interview	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA. After 3 attempts have been made to contact client ensure that either an "N" is placed in the interview completed field or that this field is left blank, with a date so that the NOMI will go out. • If client responds to NOMI before the end of the month, schedule and conduct interview. Change date on INRD to date interview was completed and enter a "Y" to acknowledge interview. Process case and client is entitled to a full month of benefits. • If client does not respond to the NOMI by the end of the month, the recert will auto-deny for "failure to Complete Interview" (CHIP denial code FC) at the end of the month. Client has until the end of the following month to complete the interview. o If client responds to the NOMI and completes interview by the end of the following month, revert recert to open status. Change recert proration date to date of interview. Code INRD with the actual interview date and acknowledge with a "Y". Process case within 30 days of the date the interview was conducted. ***Example#1:*** *Client responds to the NOMI on June 22nd. Interview is completed on June 24th All verification needed was submitted with "A" form therefore case is processed by June 30th. Client receives July benefits during regular issuance cycle.* ***Example #2:*** *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial code FC. Client contacts office on July 5th to complete interview. Interview is completed on July 5th. Case must be processed by August 4th. Benefits are prorated from July 5th.* ***Example #3:*** *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial*

			code FC. Client contacts office on August 1st to complete the interview. Client must re-apply with a new application (DSS-3800).
Timely 1st – 15th Annual recertification form is due June15th. Client submits form on June 10th. Form is registered with an application date of June 10th. INRD is coded with an interview date of 06/15. Unable to contact client after three attempts. 1st, 2nd and 3rd attempts to contact client are noted in folder notes in SCOSA. Interview is **Not** acknowledged with a "Y" in the interview completed field on INRD, therefore a NOMI is sent to the client.	**Unable to Reach Client for Interview**	**Incomplete** Additional verification needed as a result of the interview	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA. After 3 attempts have been made to contact client ensure that either an "N" is placed in the interview completed field or that this field is left blank, with a date so that the NOMI will go out. • If client responds to NOMI before the end of the month, schedule and conduct interview. Change date on INRD to date interview was completed and enter a "Y" to acknowledge interview. Send written request for verification to client and enter date that verification was requested on INRD in "info requested field" ○ Client has until the last day of the month or 10 days from the date information was requested (if there are less than 10 days from the date information was requested and the last day of the month) to provide verification and receive a full allotment. ○ If client does not submit verification, recert will auto-deny for "failure to provide verification" (CHIP code FP) and client will have until the end of the following month to provide verification. Benefits will be prorated from the date the verification is received. ***Example #1:*** *Client responds to the NOMI on June 22nd. Interview is completed on June 24th . written request for verification given to client on June 24th. Client has until July 4th to provide verification and receive a full July allotment.* ***Example #2*** *Client responds to the NOMI on June 22nd. Interview is completed on June 24th Client has until July 4th to provide verification and receive a full July allotment. Client does not provide verification. Recert is auto-denied for failure to provide information (FP). Client has until July 31st to provide verification. If verification is received between July 5th and July 31st, benefits will be prorated from the date verification is received.* • If client does not complete the interview by the end of the month, recert will auto-deny for failure to complete the interview. Client has until the end of the following month to complete the interview. • If client responds to the NOMI and completes interview by the end of the following month, revert recert to open status. Change benefit proration date to date of interview.

			Code INRD with the actual interview date and acknowledge with a "Y". Add date that verification was requested to INRD in the "info requested" field. • Client has until the end of the month or 10 days to provide verification. If client provides verification after this time frame a new 3800 must be filed. • If client responds to NOMI after the end of the month following the month the recert is due, a new 3800 must be filed. ***Example #1:***. *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial code FC. Client contacts office on July 5th to complete interview. Interview is completed on July 5th. Written request for verification is sent to client on July 5th . Client has until July 31st to provide verification. Benefits will be prorated from the date of the interview if verification is received by July 31st.* ***Example #2:*** *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial code FC. Client contacts office on July 25th to complete interview. Interview is completed on July 25th. Written request for verification is sent to client on July 25th. Client must be given at least 10 days to provide verification. Therefore, client has until August 4th to provide verification. If verification is received by August 4th benefits will be prorated from the date of the interview (July 25th).* ***Example #3:*** *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial code FC. Client contacts office on July 25th to complete interview. Interview is completed on July 25th. Written request for verification is sent to client on July 25th. Client must be given at least 10 days to provide verification. Therefore, client has until August 4th to provide verification. Client submits verification on August 5th. Client must file a new application for benefits.* ***Example#4:*** *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial code FC. Client contacts office on July 25th to complete interview. Interview is completed on July 25th. Written request for verification is sent to client on July 25th. Client must be given at least 10 days to provide verification. Therefore, client has until August 4th to provide verification.*

			Example #5: *Client does not respond by the end of the month. Recert is denied at the end of the month (06/30) with denial code FC. Client contacts office on August 1st to complete interview. A new 3800 must be filed.*
Untimely 16th – 30th (31st) Annual recertification form is due June 15th. Client submits form on June 20th. INRD is coded with an interview date of 06/25.	**Able to Reach Client for Interview**	**Complete** No additional verification needed after the interview	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA • Conduct interview and acknowledge interview completion on INRD when client is reached. • Process case within 30 days from the date "A" form was received. ***Example:*** *First and second attempts to contact client are noted in folder notes in SCOSA. Client is reached on the 2nd attempt (06/24) and interview is completed. Actual date of interview is coded on INRD and a Y is also entered to acknowledge interview. All verification needed was submitted with the "A" form therefore case is processed by July 20th. Client receives a full allotment for July.*
Untimely 16th – 30th (31st) Annual recertification form is due June 15th. Client submits form on June 20th. Form is registered with an application date of June 20th. INRD is coded with an interview date of 06/25. First and second attempts to contact client are noted in folder notes in SCOSA. Client is reached on the 2nd attempt (06/24) and interview is completed. Actual date of interview is coded on INRD and a Y is also entered to acknowledge interview. Additional verification is needed to determine eligibility. EW sends client a pending notice on 06/24.	**Able to Reach Client for Interview**	**Incomplete** Additional verification needed as a result of the interview	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA • Conduct interview; acknowledge interview completion on INRD when client is reached. • Send written request for verification or pending notice to client and enter date that verification was requested on INRD in "info requested" field. • Client has 30 days from the date form was received or 10 days from the date information was requested to provide verification. ○ If client provides verification within 30 days from the date form was received, or within 10 days from the date verification was requested he/she is entitled to a full allotment. ***Example#1:*** *Client submits verification on June 28th. Case must be* ***processed*** *by July 20th to be timely. Client receives full allotment for July* ***Example#2:*** *Additional verification is needed to determine eligibility. EW sends client a pending notice on 06/24. Client has until July 20th to provide verification. Client submits verification on July 5th and receives a full allotment for July.* ○ If the client does not provide the verification by the 30th day from the date the form was submitted or within 10 days of the date verification was requested, recert will auto-

			deny for failure to provide information (FP). If the client provides the verification between the auto-denial date (30th day) and the end of the month following the month the form was received, benefits will be prorated from the date the verification was received. ***Example #4:*** *Client does not submit verification by July 20th. Recert auto denies for failure to provide information. Client submits verification on July 29th. Case reverted to open status and benefits prorated from July 29th.*
Untimely 16th – 30th (31st) Annual recertification form is due June 15th. Client submits form on June 20th. INRD is coded with an interview date of 06/25. 1st, 2nd and 3rd attempts to contact client are noted in folder notes in SCOSA. Interview is **NOT** acknowledged with a "Y" in the interview completed field on INRD, therefore a NOMI is sent to the client.	**Unable to Reach Client for Interview**	**Complete**	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA. After 3 attempts have been made to contact client, ensure that either an "N" is placed in the interview completed field or that this field is left blank, with a date, so that the NOMI will go out. • If client responds to the NOMI by 30th day, schedule and conduct interview. Change date on INRD to date interview was completed and enter a "Y" to acknowledge interview. Process case within 30 days. Client is entitled to a full month of benefits. ***Example #1:*** *Client responds to the NOMI on 06/29. Interview is completed on 06/30. Interview date is changed on INRD to 06/30 and in order to be timely case -must be processed no later than July 20th. Client receives a full allotment for July.* • If client does not respond to NOMI by the 30th day, the recert will auto-deny for "failure to complete interview" (CHIP denial code FC). Client has until the end of the ~~following~~ month to complete the interview. ○ If client responds to the NOMI in the following month (the month after the certification ends), revert recert to open status. Change the benefit proration date to the date of the interview. Conduct interview and code INRD with the actual interview date and acknowledge with e "Y". Process case by the end of the month following the month the form was due. Benefits are prorated from the date of the interview. ***Example #2:*** *Client does not respond to NOMI by the 30th day (July 20th) Recert is denied with a denial code of FC. Client contacts office on July 22nd. Interview is completed on July 22nd. All verification needed to process case was submitted with the "A" form. Case must be processed by July 31st. Benefits are prorated from July 22nd.* ○ If client does not respond to NOMI by the end of the following month (the month after

			the certification ends) the client must file a new application (DSS-3800). ***Example #3:*** *Client does not respond to NOMI by July 31st. Recert was denied July20th with a denial code of FC. Client contacts office on August 1st to complete the interview. Client must reapply with a new application (DSS-3800).*
Untimely 16th – 30th (31st) Annual recertification form is due June 15th. Client submits form on June 20th. INRD is coded with an interview date of 06/25. 1st, 2nd and 3rd attempts to contact client are noted in folder notes in SCOSA. Interview is **NOT** acknowledged with a "Y" in the interview completed field on INRD, therefore a NOMI is sent to the client.	**Unable to Reach Client for Interview**	**Incomplete**	• Register "A" form with date received • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA. After 3 attempts have been made to contact client, ensure that either an "N" is placed in the interview completed field or that this field is left blank, with a date, so that the NOMI will go out. • If client responds to the NOMI by the 30th day schedule and conduct interview. Change date in INRD to date interview was completed and enter a "Y" to acknowledge interview. • Send written request for verification or pending notice to client and enter date that verification was requested on INRD in "info requested" field. • Client has 30 days from the date form was received or 10 days from the date information was requested to provide verification. ○ If client provides verification by the end of the month or within 10 days from the date verification was requested he/she is entitled to a full allotment. ***Example #1*** *Client responds to the NOMI on 06/29. Interview is completed on 06/30. Interview date is changed on INRD to 06/30. Client has until July 20th to provide verification. Client provides verification on July 15th. Client receives a full allotment for July.* • If client does not respond to NOMI by the 30th day, the recert will auto-deny for "failure to complete interview" (CHIP denial code FC). Client has until the end of the month (following the month form was due) to complete the interview. ○ If client responds to the NOMI after the 30th day but before the end of the month after the certification ends, revert recert to open status. Change the benefit proration date to the date of the interview. Conduct interview and code INRD with the actual interview date and acknowledge with e "Y" **AND** Code date verification was requested on INRD in Info Requested field. Send written request for verification or pending notice to client. **Caution: If the FC denial and subsequent interview occur early enough in the month**

			where there are more than 10 days from the date of the interview to the end of the month, you need to over-ride the auto denial in order to prevent the case from denying prior to the last day of the month. ***Example #2*** *Client does not respond to the NOMI by the 30th day (07/20). Recert is denied (07/20) with a denial code of FC. Client contacts the office on July 26th. Interview is completed July 26th. Written request for verification is sent to client on July 26th requesting verification by August 5. Client must provide verification within 10 days. Benefits are prorated from the date of the interview. If the verification does not come in by August 5th the case is closed and the client must reapply.* • If client does not respond to NOMI by the end of the following month (the month after the certification ends) the client must file a new application (DSS-3800). ***Example#3*** *Client does not respond to the NOMI by the end of the month (July). Recert has already been denied on June 20th with a denial code of FC. Client contacts the office on August 1st. Client must file a new application.*
Late 1st – 30th (31st) of the following month Annual recertification form is due June 15th. Client submits form July 5th. Case is re-opened and registered with a date of July 5th. Interview is conducted on July 7th.	**Able to Reach Client for Interview**	**Complete** No additional verification needed after the interview	• Case will be in denied status. • Revert case to open status and register recert with date form is received. • Screen for entitlement to expedited processing. • Schedule interview on CHIP Screen INRD. **Note:** If expedited, interview will have to be scheduled so that client will receive benefits by the 7th calendar day following the date the form was received. • Document each attempt to contact client for interview in SCOSA and document interview when client is reached Conduct interview, acknowledge interview completion on INRD and process case within 30 days from file date. Benefits are prorated from the date form is received. **Note: Case must be processed by 6th calendar day if expedited.** ***Example#1:*** *All verification needed was submitted with "A" form therefore case is processed by August 4th (30 days). Benefits are prorated from the date form was received. If expedited, benefits are processed by July 11th.*
Late 1st – 30th (31st) of the following month Annual recertification form is due June 15th. Client submits	**Able to Reach Client for Interview**	**Incomplete** Additional verification needed as a result of the interview	• Case will be in denied status. • Revert case to open status and register recert with date form is received. • Screen for entitlement to expedited processing.

form July 5th. Case is re-opened and registered with a date of July 5th. Interview is conducted on July 7th. Written request for verification is sent to client on July ~~5th~~ 7th with a due date of July 17th.			• Schedule interview on CHIP Screen INRD. **Note:** If expedited, interview will have to be scheduled so that client will receive benefits by the 7th calendar day following the date the form was received. • Document each attempt to contact client for interview in SCOSA and document interview when client is reached • Conduct interview, acknowledge interview completion on INRD and send written request for additional information. **Note:** If expedited case must be processed with postponed verification by 6th calendar day. • Client has 30 days from the date form was filed or 10 days (from the date verification was requested if interviewed and/or requested late) to provide verification. ***Example #1:*** *Information is received on July 15th. Case is processed within 30 days (August 4th) of file date. Benefits are prorated from July 5th.* ***Example#2:*** *Information is received on July 28th. Case must be processed by August 4th. Benefits are prorated from July 5th.* ***Example #3:*** *Information is received on August 1st. Since this is within the 30 days from the date form was received, case is processed (by August 4th) and benefits prorated from the date form was received (July 5th).* ***Example #4:*** *Information is received on August 6th. Since this is beyond the 30 days from the date form was received and the form was received in the month following the month the form was due, client must reapply and file a new DSS-3800.* ***Example#5*** *Case meets expedited criteria. Process case (for July benefits) as expedited with postponed verification by July 11th (6th calendar day assuming that client already has an EBT card) Client has 30 days from July 5th to provide verification for benefits beyond July.*
Late 1st – 30th (31st) of the following month Annual recertification form is due June 15th. Client submits form July 5th. Case	**Unable to Reach Client for Interview**	**Complete** No additional verification needed after the interview	• Case will be in denied status. • Revert case to open status and register recert with date form is received. • Screen for entitlement to expedited processing. • Schedule interview on CHIP Screen INRD.

is re-opened and registered with a date of July 5th. INRD is coded with an interview date of July 11th. 1st, 2nd and 3rd attempts to contact client are documented in SCOSA. Interview is not acknowledged with a "Y" on INRD, therefore NOMI is sent on 07/11.			• Document each attempt to contact client for interview in SCOSA. After 3 attempts have been made to contact client, ensure that either an "N" is placed in the interview completed field or that this field is left blank, with a date, so that the NOMI will go out. • If expedited, client loses entitlement to expedited services once the NOMI has been sent as a result of failure to complete the interview. • If client responds to the NOMI by the end of the month, schedule and conduct interview. Change date on INRD to date interview was completed and enter a "Y" to acknowledge interview. • Process case within 30 days from the date form was received. ***Example #1:*** *Client responds to NOMI on 07/15. Interview is conducted on 07/18. All verification needed was submitted with "A" form therefore case is processed by August 4th. Benefits are prorated from July 5th.* ***Example #2:*** *Client responds to NOMI on 07/28. Interview is conducted on 07/28. All verification needed was submitted with "A" form therefore case is processed by August 4th. Benefits are prorated from July 5th.* ○ If client does not respond to the NOMI by the 30th day(following the date the form was received), case remains denied and client must reapply using a new application. ***Example #1:*** *Client responds to NOMI on 08/05. Client must file a new application (DSS-3800).*
Late 1st – 30th (31st) of the following month Annual recertification form is due June 15th. Client submits form July 5th. Case is re-opened and registered with a date of July 5th. INRD is coded with an interview date of July 11th. 1st, 2nd and 3rd attempts to contact client are documented in SCOSA. Interview is not acknowledged with a "Y" on INRD,	**Unable to Reach Client for Interview**	**Incomplete** Additional verification needed as a result of the interview	• Case will be in denied status. • Revert case to open status and register recert with date form is received. • Schedule interview on CHIP Screen INRD. • Document each attempt to contact client for interview in SCOSA. After 3 attempts have been made to contact client, ensure that either an "N" is placed in the interview completed field or that this field is left blank, with a date, so that the NOMI will go out. • If expedited, client loses entitlement to expedited services once the NOMI has been sent as a result of failure to complete the interview. • If client responds to the NOMI by the end of the month, schedule and conduct interview. Change date on INRD to date interview was completed and enter a "Y" to acknowledge interview.

therefore NOMI is sent on 07/11.			• Send written request for additional information. • Client has 30 days from the date form was filed or 10 days (from the date verification was requested if interviewed and/or requested late) to provide verification. ***Example #1:*** *Client responds to NOMI on 07/15. Interview is conducted on 07/18. Written request for verification is given to client on 07/18 requesting information by 07/28. If client submits verification by August 4th, case can be processed and benefits will be prorated from the date form was filed (07/05). If verification comes in on August 5th or later, client must reapply.* ***Example #2:*** *Client responds to NOMI on 07/15. Interview is conducted on 07/18. EW forgets to send written request for verification and does not send it until 07/28. Client must be given at least 10 days to provide verification. Therefore, if client provides verification by 08/07 case can be processed and benefits will be prorated from July 5th.* ***Example #3:*** *Client responds to NOMI on 07/28. Interview is conducted on 07/28. Client must be given at least 10 days to provide verification. Therefore, if client provides verification by 08/07 case can be processed and benefits prorated from July 5th.* ***Example #4:*** *Client responds to NOMI on 07/28. Interview is conducted on 07/28. Client must be given at least 10 days to provide verification. Client does not provide information until August 11th (14th day) Client must reapply with a new application.* o If client does not respond to the NOMI by the 30th day(following the date the form was received), case remains denied and client must reapply using a new application. ***Example #1:*** *Client responds to NOMI on 08/05. Client must file a new application (DSS-3800).*

6: SNAP SIX MONTH RECERTIFICATION CHART

Timely 1st – 15th	**Complete** No additional verification needed after the interview	Process recertification by the end of the month
Timely 1st – 15th Client submits six month recertification on December 10th. Form is incomplete.	**Incomplete** Additional verification needed	• Code as incomplete on CHIP Screen **MRRE** • Send incomplete MR Notice (C016). • Client has 10 days from the date of request for verification or until the end of the month (whichever is greater) to return the verification and receive a full month's of benefits. ***Example #1***: *Worker sends incomplete notice/request for verification on December 17th. Client has until the last day of the month to return verification for full allotment. If client submits verification by December 31st, client receives a full allotment for January.* ***Example #2***: *Worker sends incomplete notice/.request for verification on December 23rd. Client has until January 2nd to submit verification, because there was not 10 days from the date the verification was requested to the end of the month. Client must be given at least 10 days to submit verification. If client submits verification by January 2nd, client receives a full allotment for January.* o Client has until the end of the following month to return the verification and receive prorated benefits. **Note:** benefits would be prorated from the date verification is received. CHIP will do this automatically if the EW enters the date verification was received in the verification received field on CHIP Screen **MRVE** ***Example 3:*** *Worker sends incomplete notice/request for verification on December 17th. Client had until the last day of the month to return verification and receive a full allotment. Client submits verification on January 2nd. Benefits are prorated from January 2nd.* ***Example #4***: *Worker sends incomplete notice/request for verification on December 23rd. Client had until January 2nd to submit verification, because there was not 10 days from the date the verification was requested to the end of the month. Client must be given at least 10 days to submit verification. Client did not submit verification until January 5th. Benefits are prorated from January 5th.* If verification is **not** returned by the end of the month following the month the form was due, client must reapply. ***Example #5:*** *Worker sends incomplete notice/request for verification on December 17th. Client had until the last day of the month (December) to return verification and receive a full allotment. Client submits verification on February 1st. Client must reapply.* ***Example #6:*** *Client submits six month recertification on December 10th. Form is incomplete. Worker sends incomplete notice/request for verification on December 23rd. Client had until January 2nd to submit verification, because there was not 10 days from the date the verification was requested to the end of the month. Client must be given at least 10 days to submit verification. Client did not submit verification until February 1st. Client must reapply.*

Untimely 16th – 30th (31st)	**Complete** No additional verification needed after the interview	• If the form is received before the MR Noncompliance notice is sent, register the six month recertification and process within 30 days. Note: if the form is complete it is best to go ahead and process the case as soon as this determination is made rather than waiting up to 30 days to process. The case will remain open until a decision is made on the case. ***Example #1:*** *Client submits six month recertification on December 17th. CHIP Screen NOHS shows that the MR Noncompliance notice has not been sent. Recert is registered on December 17th. Worker has until January 16th to process case. Note: Since the 16th falls on a Sunday, worker must process case by January 14th in order to be timely.* • If the form is received after the MR noncompliance Notice is sent (after CHIP Cutoff), verify that the form has been registered in CHIP. If it has not been registered, revert case to open status and register as complete and process within 30 days. ***Example #2:*** *Client submits six month recertification on December 23rd. CHIP Screen NOHS shows that the MR Noncompliance notice has been sent. Case is now in Frozen status. Case is reverted to open status and Recert is registered on December 23rd. Worker has until January 22nd to process case. Note: Since the 22nd falls on a Saturday, worker must process case by January 21st in order to be timely.* **Hint: If the form happens to come in on the same day that the noncompliance notice is created (the notice will show on NOHS without a date in the date printed field), the form can be registered and the notice deleted to prevent calls from the client regarding the noncompliance notice.**
Untimely 16th – 30th (31st) Client submits six month recertification on December 23rd. CHIP Screen NOHS shows that the MR Noncompliance notice has been sent. Case is now in Frozen status. Case is reverted to open status and Recert is registered on December 23rd as incomplete	**Incomplete** Additional verification needed	• Register form as incomplete. If the Noncompliance notice has already been sent, the case will have to be reverted to open status in order to register the form as incomplete. • Send incomplete MR Notice (C016). • Client has 30 days from the date form was received or 10 days from the date the request for verification was sent (whichever is later) to submit verification and receive a full month's allotment. ***Example # 1:*** *Request for verification is sent to client on December 23rd. Client has until January 22nd to submit verification and receive a full month's allotment. Note: Since the 22nd falls on a Saturday, and the client must be given a full 30 days to submit verification, if the verification comes in on Monday the 24th, it is still considered timely and the client is entitled to a full month's benefits.* ***Example #2:*** *EW forgets to send the notice to client requesting the verification. EW discovers this and sends the notice to client on January 18th. Client would have had until January 22nd to submit verification but because the agency delayed notification and the client must be given at least 10 days to submit verification, client has until January 28th to submit verification. If client submits verification by the 28th client is entitled to a full month's allotment for January.* ***Example #3 :*** *EW forgets to send the notice to client requesting the verification. EW discovers this and sends the notice to client on January 18th. Client would have had until January 22nd to submit verification but because the agency delayed notification and the client must be given at least 10 days to submit verification, client has until January 28th to submit verification. Client submits verification on January 31st. The* ***verification*** *is untimely and client's benefits must be prorated from January 31st.*

		Example #4: *EW forgets to send the notice to client requesting the verification. EW discovers this and sends the notice to client on January 18th. Client would have had until January 22nd to submit verification but because the agency delayed notification and the client must be given at least 10 days to submit verification, client has until January 28th to submit verification. Client submits verification on February 1st. The* ***verification*** *is late therefore the client must reapply.*
Late 1st – 30th (31st) of the following month Six Month recertification was due on December 15th. Client submits form on January 20th (form is complete).	**Complete** No additional verification needed after the interview	• Revert case to open status and register recertification as complete. • Screen for entitlement to expedited processing. ○ If expedited, process case by the 6th calendar day following the date form was received. ○ If not expedited, process within 30 days. • Benefits are prorated from the date the form is received. ***Example #1***: *EW processes case no later than February 19th. Benefits are prorated from January 20th.* ***Example #2*** *Recert form received on January 20th and screening indicates case is expedited. Case is processed no later than January 26th for January and February (since form is rec'd after the 15th of the month). Benefits are prorated from January 20th.*
Late 1st – 30th (31st) of the following month Six month recertification was due on December 15th. Client submits form on January 20th (form is incomplete).	**Incomplete** Additional verification needed	• Revert case to open status • Screen for entitlement to expedited processing. ○ If expedited, process case with postponed verification by the 6th calendar day following the date the form was received. Benefit proration date will be set as the date form was received. • If not expedited, register as incomplete. Benefit proration date will be set as the date form was received. • Send incomplete notice (C016) • Client has 30 days from the date form was submitted to provide verification OR 10 days from the date the verification was requested (if information was requested by the agency late). Benefits will be prorated from the date form was received. ***Example #1:*** *EW sends incomplete notice to client on 01/20. Client has until February 19th to return verification. Client submits verification on February 17th. S form is approved and benefits prorated from January 20th.* ***Example #2:*** *EW does not send incomplete notice to client until February 15th. Client must be given 10 days to return verification. Therefore client has until February 25th to submit verification. Client submits verification by February 25th case is approved and benefits prorated from January 20th.* ***Example #3:*** *EW sends incomplete notice to client on 01/20. Client has until February 19th to return verification. Client submits verification on February 25th.* ***Verification*** *is late; therefore client must re-apply with a new DSS-3800.* ***Example #4:*** *EW does not send incomplete notice to client until February 15th. Client must be*

		given 10 days to return verification. Therefore client has until February 25th to submit verification. Client submits verification on February 28th. ***Verification*** *is late; therefore client must re-apply with a new DSS-3800.* ***Example #5:*** *Recert form received on January 20th and screening indicates case is expedited. Case is processed no later than January 26th for January and February (since form is rec'd after the 15th of the month). Benefits are prorated from January 20th. Case is pended for postponed verification.*

7: SNAP 2 WORK REFERRAL GUIDE (Updated 07/2015)

WHO SHOULD BE REFERRED			
	• Age 18 – 49 • **Not Exempt from Work Registration requirements; (Refer to SNAP Policy Manual, Chapt. 8)** • Without dependents; • Able-bodied;		
CO#	**COUNTY NAME**	**E&T Database Referral Contact (RC)** (Name of person to whom Referrals Should be directed in the ET Database)	**Appointment Phone #** (Phone number clients must call to schedule the initial appointment)
01	Abbeville	Andrea Dawson	864-366-5481 ext.134
02	Aiken	Joe Bacote	803-642-3613
03	Allendale	Audrey Drayton	803-584-7048 ext. 232
04	Anderson	Arvid Fredrickson	864-359-3175
05	Bamberg	Deborah Holman	(803) 245-4361
06	Barnwell	Unika Milhouse	803-541-1216
07	Beaufort	James Daniel	843-255-6146
08	Berkeley	Elizabeth Snider	843-719-1149
09	Calhoun	Clayann Fields	803-874-3384 ext. 139
10	Charleston	David Johnson	843-953-0321
11	Cherokee	Larry Snow	864-487-2704 ext. 258
12	Chester	Maria Simpson	803-377-7270
13	Chesterfield	Tumeka F Watson	843-623-5320
14	Clarendon	Julia Lawson	803 435-4303 ext. 227
15	Colleton	Tawanda Jenkins	843 584-4018
16	Darlington	Diana Barnhill	843-332-2231 ext. 376
17	Dillon	Dawnyelle Livingston	843-627-7036
18	Dorchester	Charlene Boyd	843-832-0112 ext. 311
19	Edgefield	Sherri Saxon	803-637-4040 ext. 132
20	Fairfield	Linda Tucker	803-589-8028
21	**Florence**	**Michele Head**	**843-519-0129**
22	Georgetown	Deborah Matthews	843-546-5134
23	Greenville	Verlinda Moore	864-467-7727
24	Greenwood	Deresa Burton	864 229-4302
25	Hampton	Maryanne Phillips	803-943-3641
26	Horry	Jackie Hanselman	843-915-4829
27	Jasper	Deborah Ferguson	843-726-7750 ext. 244
28	Kershaw	Shontele McPherson	803-572-8242
29	Lancaster	Janice Broach	803-289-1505
30	Laurens	Tomekia Means	864-547-8077
31	Lee	Jarrell Rogers	803-484-5376 ext. 329
32	Lexington	Linda Halls	803-785-2915
33	McCormick	Tara M. Johnson	864-465-5210
34	Marion	Margaret Brunson	843-423-4623
35	Marlboro	Louise Moore	843-544-4034
36	Newberry	Laura McCullough	803-321-2155

CO#	COUNTY NAME	E&T Database Referral Contact (RC) (Name of Person to Whom Referrals Should be directed in the ET Database)	Appointment Phone # (Phone number clients must call to schedule the initial appointment)
37	Oconee	Laura Canty	864-638-4400 ext. 123
38	Orangeburg	Stacie Fulton	803-515-1759
39	Pickens	Dana Taylor	864-898-2434
40	Richland	Pamela Black	803-714-7424
41	Saluda	Kristy Fulmer	864-803-1028
42	Spartanburg	Jennifer Wheeler	864-345-1182
43	Sumter	Lisa Kee	803-773-5531 ext. 227
44	Union	Kimberly Harris	864-429-1660 ext. 120
45	Williamsburg	Wilbur Fulton	843-355-0970
46	York	Kenneth Leon Carter	803-909-7446

8: NATIONAL DIRECTORY OF CONTACTS

Contacts to verify duplicate participation, or obtain verification for SNAP Benefits. This directory is intended for use by authorized personnel in the administration of the SNAP Program.

Revision Date: 01-16-15

ALABAMA

SNAP Participation: Email contact preferred to: fs@dhr.alabama.gov

For other participation questions:
Betty S. White, Program Supervisor
Alabama Dept. of Human Resources
50 Ripley St, S. Gordon Persons Bldg.
Montgomery, AL 36130-4000
Email: Betty.White@dhr.alabama.gov
PIDParis@medicaid.alabama.gov
Phone: 334-242-1745; Fax: 334-353-1363
Medical Benefits: Phone (334) 242-5010
TANF/FIP: (334) 242-0531

Claims: Email contact preferred to: Felecia Powell
Felecia.Powell@dhr.alabama.gov
For other claims questions: Felecia Powell
Same address as above
Phone: 334-353-3118; Fax: 334-353-1363

WEB: www.dhr.alabama.gov

ALASKA

Alaska Dept of Health & Social Services
Division of Public Assistance
Contact the office from which the client last received benefits. A list of offices can be found at:
http://dhss.alaska.gov/dpa/Pages/features/org/dpado.aspx

If location of office is unknown, contact Director's Office/Policy Section at DPApolicy@alaska.gov
Phone: (907) 465-3347
Address: PO Box 110640, Juneau, AK 99811-0640

WEB: http://www.hss.state.ak.us/dpa/

The State would prefer a FAX sent to (907) 465-5254.

ARIZONA

Dept. of Economic Security Communication Center
Emails are preferred over faxing requests.

Email requests to: Azstateinquiries@Azdes.gov

FAX: 602-353-5746
Phone number for request messages can be left at: (602) 771-2047

WEB: www.azdes.gov

ARKANSAS

Ruthie Broughton
DHS Program Manager, Customer Assistance Unit
PO Box 1437, Slot S-341
Little Rock, Arkansas 72203-1437
Phone: (501) 682-8993
Email: ruthie.broughton@arkansas.gov

WEB: www.arkansas.gov/dhhs

CALIFORNIA

California Department of Social Services
744 P Street, MS 8-4-23
Sacramento, CA 95814-6400

OUT OF STATE INQUIRIES
The city and/or county in which the client resided in California must be provided in order to provide a referral to one of the 58 counties for verification of benefits.

Telephone number: (916)651-8848; press 1, then press 7 **OR** FAX number: (916)651-8866 **OR** http://www.cdss.ca.gov/cdssweb/entres/pdf/CountyCentralIndexListing.pdf to get a Central County Index Listing.

COLORADO

Patrick Lopez, Program Assistant
Food Assistance-Food Stamps, Dept of Human Services
1575 Sherman St, 3rd Fl
Denver, CO 80203
Phone: (303) 866-3122 Fax: (303) 866-5098
Email: patrick.lopez@state.co.us

Fraud Hotline: 1-877-934-6361 recording

WEB: www.cdhs.state.co.us

CONNECTICUT

Department of Social Service
Office of Public Affairs
55 Farmington Ave.
Hartford, CT 06105-3725

For SNAP:
FAX Request on your AGENCY'S LETTERHEAD to 860-566-2022.

Allow 3 to 5 working days for a response.

For TANF:
Contact Elaine Davis
Telephone: 1-860-566-2022 or
Email: Elaine.Davis@ct.gov

DELAWARE

FOR SNAP
Yvonne Smith-Rahama
Delaware Division of Social Services
Po Box 906, New Castle, DE 19720
Phone: 302-255-9659
Email: DHSS_DSS_Outofstate@state.de.us
Web: http://www.dhss.delaware.gov/dhss/dss

FOR ALL OTHER PROGRAMS
Delaware Department of Health and Social Services
Audit & Recovery Management Services (ARMS)
1901 N. DuPont Highway, New Castle, DE 19720

Effective May 1, 2012, Delaware will no longer respond to fax requests for PARIS matches. To verify public assistance benefit status in Delaware for dual participation alerts & nvestigations, PARIS matches, etc., please send an email from your STATE or COUNTY email account to:
DE_PARIS-ARMS@state.de.us with the following information*:

"Out-of-State Inquiry" in the subject line

1. Your Name, Title, Agency Name, Address, phone number and fax number in the body of the email
2. **Name**(s) and **date**(s) **of birth** for the household member(s) applying for, or receiving, benefits in your State
3. The **last four digits** of each member(s) **Social Security Number**
4. A **current address for the household member**(s) and the date it was reported to your state so that request for contact letter(s) and/or closure notice(s) can be sent to the client

(*if your email address is not recognized as a State or County agency you may be required to verify your identity in another manner)

Responses to your request will be sent via email within 5 business days.

DISTRICT OF COLUMBIA

Penny Boyd
DC Department of Human Services
Economic Security Administration
64 New York Avenue, N.E. – 5th Floor
Washington, D.C. 20002
Phone: (202) 535-1441
Fax #: (202) 535-1455
Email: Penny.Boyd@dc.gov

WEB: www.dhs.dc.gov

FLORIDA

Out of State inquiries:
Miami Call Center
PREFERRED METHOD: Email to:
D11.SFL.CallCenter@myflfamilies.com
(You should hear back from them within 5 business days)

Dept. of Children & Families
1317 Winewood Blvd., Bldg. 3, Room 435
Tallahassee, FL 32399-0700
Phone: 866-762-2237
Fax: 1-866 658 4135
WEB: www.dcf.state.fl.us/ess/

GEORGIA

DFCS Customer Service Operations
2 Peachtree Street, Suite 8-268
Atlanta, Georgia 30303
Phone: 1-877-423-4746: Fax: 1-888-740-9355.
Email inquiry is the preferred method:
Send requests for out-of-State verification to:
advocate@dhr.state.ga.us
WEB: www.dhr.state.ga.us

GUAM

Annie Gozum-Soto, Administrator
Bureau of Economic Security, Division of Public Welfare
Department of Public Health and Social Services
123 Chalan Kareta
Mangilao, Guam 96913-6304
Email: annie.soto@dphss.guam.gov
Contact number: 671-735-7354
FAX: (671) 734-5910
WEB: http://dphss.guam.gov

HAWAII

Department of Human Services
State Office Administrative Assistant (FSP & TANF)
Benefit, Employment & Support Services Division
820 Mililani Street, Suite 606
Honolulu, Hi 96813

Phone: (808) 586-5720 (SNAP)
Phone: (808) 586-5732 (TANF)

If unable to get through, please call (808) 586-5735 for both SNAP/TANF.

WEB: http://hawaii.gov/dhs

IDAHO

Idaho Department of Health & Welfare
Division of Welfare, 2nd Floor
P.O. Box 83720
Boise, ID 83720-0036

Contact information to verify benefit status for **applicants** in your state coming from Idaho:
Phone: (208) 334-5815
Fax: (208) 334-5817 or 1-866-434-8278
Email: mybenefits@dhw.idaho.gov

To verify benefit status in Idaho for clients already active on benefits in your state (dual participation alerts & investigations, PARIS matches, etc.), please contact the Fraud Unit via e-mail at: welfraud@dhw.idaho.gov.

WEB: http://www.healthandwelfare.idaho.gov/

ILLINOIS

Illinois Department of Human Services
Bureau of Customer Support and Services
2nd Floor Harris I, 100 South Grand Ave E
Springfield, IL 62762
Email: DHS.WebBits@Illinois.gov (Please note "Out of State Inquiry" in the subject line of all emails.)
Phone: (217) 524-4174
Fax 217-557-1370

WEB: www.dhs.state.il.us

INDIANA

Indiana Family & Social Services Administration
P.O. Box 1810
Marion, IN 46952

CALL CENTER: (Note: The numbers are intended to be the same)
Phone: 1-800-403-0864
Fax: 1-800-403-0864
(Include SSN, DOB and full name)

WEB: www.in.gov/fssa/

IOWA

Integrated Claims Recovery Unit
PO Box 36570
Des Moines, IA 50315
To verify benefits and/or TANF months:
Call Integrated Claims Recovery Unit at:
Phone: 1-877-855-0021; **OR** Fax: 515-564-4095 **OR**
Email: ICRU@dhs.state.ia.us

To have an active Iowa case closed:
Clients can call Customer Service Call Center at 1-877-347-5678 **OR** Email: IMCustomerSC@dhs.state.ia.us

Website: www.dhs.state.ia.us

KANSAS

Kansas Department for Children and Families
Economic and Employment Services
915 SW Harrison, Suite 580
Topeka, KS 66612

Out-of-State Inquiries for SNAP and TANF:
ebtmail@dcf.ks.gov

Customer Service Assistance: 1-888-369-4777

WEB: www.dcf.ks.gov

KENTUCKY

Send OUT OF STATE INQUIRIES For SNAP, MEDICAID and TANF - Email: Outofstateinquiries@ky.gov

Phone: (502) 564-3440

WEB: http://cfc.ky.gov

LOUISIANA

Cara (Yvette) Shields, Program Specialist
Louisiana Department of Children and Family Services
Bureau of Communications & Governmental Affairs
627 North 4th Street, 8th Floor
Baton Rouge, Louisiana 70802
Phone: (225) 342-2342; FAX: (225) 342-9833
Email: cara.shields@la.gov
WEB: www.dcfs.louisiana.gov

MAINE

A signed release is required to obtain the verification

Out-of-State Inquiries
ACES Help Desk – Eligibility Specialists
Department of Health and Human Services Office for Family Independence
19 Union Street, SHS#11
Augusta, ME 04333 Phone: (207)-624-4130 Fax: (207) 287-3455
E-Mail: DESK.ACESHELP@Maine.gov
WEB: http://www.maine.gov/dhhs/ofi/index.html

MARYLAND

Maryland Department of Human Resources
311 W. Saratoga St.
Baltimore, MD 21201

For out of state inquiries for all programs or PARIS matches, forward your request to:
Email: dhr.outofstateinquiry@maryland.gov

MASSACHUSETTS

MA Department of Transitional Assistance
Data Matching Unit
600 Washington Street, 5th Floor
Boston, MA 02111

MAIL or FAX REQUEST ON AGENCY LETTERHEAD: FAX # 617-889-7847

WEB: www.state.ma.us/DTA

MICHIGAN

Current Benefit Information:
Dept of Human Services
PO Box 30037
235 S. Grand Ave.
Lansing, MI 48909

Out-of-State Inquiries by Professional Staff only:
1-517-373-3908
General SNAP Inquires by clients : 1-855-ASK-MICH
FAX: 1-517-335-6054
Email: DHS-ICU-Customer-Service@michigan.gov
(Require client's new address before they will close case in MI (if sending request via fax or email)
WEB: www.michigan.gov/dhs

MINNESOTA

Minnesota Department of Human Services
Economic Assistance and Employment Services Division
PO Box 64951
St. Paul, MN 55164-0951

Out of State Inquiries for case status of SNAP and TANF programs and the number of TANF months expended are provided through an automated web service.

Go to the website by clicking on this link**:**
Minnesota SNAP and TANF Verification Web Site

Or type the web site address into your browser address bar:
https://mn.gov/snap-tanf-benefit-verification/

At the web site home page**, complete** the required fields for self- registration. In the code field, enter the word **guest.** After accepting the Oath, click the **Next** button which brings up the client information page. When all the client information has been entered, click the s**ubmit** button which generates the request. A secure email response will be sent to the requestor with the results of the benefit verification. No other means for requesting this information is offered.

MISSISSIPPI

Department of Human Services
Division of Field Operations
P.O. Box 352
Jackson, MS 39205
Phone: 1-800-948-3050

OUT OF STATE INQUIRES:
Email: ea.CustomerService@mdhs.ms.gov
This is preferred method for requests: Please include email address, agency telephone number and mailing address. Also include case member's name, date of birth, SSN, current mailing address and brief description of verification that is needed.

FAX: 601-359-4550 (Not preferred)

WEB: www.mdhs.state.ms.us

MISSOURI	MONTANA
Correspondence and Information Unit Family Support Division Department of Social Services P.O. Box 2320, Jefferson City, MO 65102-2320 Interactive Voice Response: 1-800-392-1261 Email: Cole.CoXIX@dss.mo.gov WEB: http://www.dss.mo.gov **OR** Out-of-State line: The Family Support Division Information Center at 855-FSD-INFO or 855-373-4636, Option 3.	**Mollye Gauer** Department of Public Health & Human Services Human & Community Services Division PO Box 202925, Helena, MT 59620-2925 Phone: (406) 444-9401; Email: mgauer@mt.gov WEB: http://www.dphhs.mt.gov/ **For TANF months verification ONLY:** Pam Barragato, TANF Program Officer 111 N. Jackson, Helena, MT 59601 Phone: (406)444-4139; FAX: (406)444-0617 **OR** Email: PBarragato@mt.gov
NEBRASKA	**NEVADA**
Customer Service Center Economic Assistance Customer Service Center Toll-free: 1-800- 383-4278 WEB: www.accessnebraska.ne.gov For verification of TANF months: Email: DHHS.EconomicAssistancePolicyQuestions@nebraska.gov Medicaid inquiries: Email at DHHS.MedicaidPolicyQuestions@nebraska.gov	Dept of Health & Human Services Division of Welfare and Supportive Services 1470 College Parkway Carson City, NV 89706 **Out of State Inquiries:** Email: WELFOOSINQUIRIES@DWSS.NV.GOV **(Prefer)** **or** **Fax: 775-684-0680** Nevada requires requests to be sent on agency letterhead. Please include clients; Name, Date of Birth; the SSN or the last 4 of the SSN; and a listing of all household members who are applying for assistance in your state. Also be sure to include the return information (your name, phone, and fax #'s). Please allow 3 – 5 business days for a response. WEB: http://dwss.nv.gov

NEW HAMPSHIRE

Barbara Farrell
Family Service/SOP_Brown
Department of Health & Human Services
Division of Family Assistance Client Services
129 Pleasant St, Concord, NH 03301

Client Services #: 603-271-9700.
In-state 800#: 1-800-852-3345 x 9700
FAX: (603)-271-4230

WEB: http://www.dhhs.nh.gov/

NEW JERSEY

Department of Human Services Division
of Family Development Program
Assessment and Integrity Unit P.O. Box
716
Trenton, NJ 08625-0716

NJ no longer accepts faxed requests. The request must be e-mailed to dfd.paiu@dhs.state.nj.us. It is also required that the individual's name, DOB and last 4 numbers of their SSN be included.

Contact Robert Clayborne, Supervisor, 609-631-4552, if you need any assistance.

WEB: www.state.nj.us/humanservices/dfd/index.html

NEW MEXICO

FOR OUT-OF-STATE BENEFIT INQUIRIES, PLEASE: FAX your request (on Agency's letterhead or with Client's signed Release) to: (505) 827-7203

Or you may CALL: (505) 827-7250
EMAIL: Carrie McCabe at carrie.mccabe@state.nm.us

New Mexico Human Services Department
Income Support Division
P.O. Box 2348
Santa Fe, NM 87504-2348
(505) 827-7250

WEB: www.hsd.state.nm.us

NEW YORK

TO VERIFY RECEIPT OF SNAP BENEFITS OR TANF ASSISTANCE OR TANF MONTHS: FAX Request on your AGENCY'S LETTERHEAD to the OUT-OF-STATE INQUIRY UNIT at 518-474-8090. No Email/Phone.

FOR FRAUD ISSUES ONLY: DO NOT SUBMIT VERIFICATION REQUESTS TO MR. PITTZ

Larry Pittz, Director
Program Integrity, Audit & Quality Improvement
NYS OTDA, Riverview Center
4th Floor, 40 N Pearl St., Albany, NY 12243

Phone (518) 402-0125; Fax (518) 402-0121
Email: Larry.Pittz@otda.state.ny.us

WEB: http://www.dfa.state.ny.us

NORTH CAROLINA

North Carolina Department of Health &
Human Services Division of Social Services

Out of State Inquiries for SNAP and TANF:

Mail: DHHS (EBT) Call Center
P. O. Box 190
Everetts, NC 27829
Fax: (252) 789-5395
Phone: 1-866-719-0141
Email: ebt.csc.leads@dhhs.nc.gov

NOTE: When forwarding request to the DHHS Call Center, include your agency's name, mailing address, telephone number, and fax number if not already indicated in your request. Due to NC security requirements with SSNs, if your original e-mail contained a full SSN, it will be edited so that only the last four digits remain.

WEB: www.ncdhhs.gov/dss

NORTH DAKOTA

ND Department of Human Services
600 East Boulevard Ave, Dept 325
Bismarck ND 58505-0250

Out of State Inquiries for SNAP and TANF:
Fax or send a secure E-mail request with client's name, SSN, and DOB on your Agency's Letterhead to:
Fax: 701-328-1060
Email: dhseap@nd.gov
Phone: Nadine Philp (701) 328-2332
Emily Schumacher (701) 328-3513
Please allow 1 to 3 business days for a response

Out of State Inquiries for Medicaid:
Fax or send a secure E-mail request with client's name, SSN, and DOB on your Agency's Letterhead to:
Fax: 701-328-5406
Email: jhelbling@nd.gov
Phone: Janet Helbling (701) 328-1065

Website: www.nd.gov/dhs/services

OHIO

Office of Family Assistance
Ohio Department of Job & Family Services
P.O. Box 183204
Columbus, Ohio 43218-3204

Food Assistance/TANF Out of State Inquiries
Contact Information: You can contact the Office of Family Assistance at (614) 466-4815 but staff cannot provide benefit information. Because Ohio is a state supervised, county administered state any eligibility information must be given by the county agency.

To receive direct contact information for each county agency, see attached.

OKLAHOMA

Out-of-State Inquiry contact information:
SNAP inquiries: SNAP@okdhs.org
LIHEAP inquiries: liheap2@okdhs.org
Phone: 405-521-3444

Kathie Wright
Program Manager, Adult and Family Services
Oklahoma Department of Human Services
Sequoyah Memorial Office Building, 2400 N. Lincoln Blvd., Oklahoma City, OK 73105
P.O. Box 25352, Oklahoma City, OK 73125
Phone: (405) 521-3444 Fax: (405) 521-4158
Email: Kathie.wright@okdhs.org
WEB: www.okdhs.org

OREGON

Oregon requires States to fax their request:

TO VERIFY RECEIPT OF SNAP, MEDICAL, AND/OR TANF BENEFITS:
FAX request w/**client's name, SSN & DOB** on your Agency's Letterhead to **(503) 373-7032.**

Oregon Department of Human Services
500 Summer St. NE, E-48
Salem, OR 97301-1066
Phone: (503) 945-5600
Fax: (503) 373-7032 or 503-581-6198

Web:
http://www.oregon.gov/DHS/assistance/index.shtml

PENNSYLVANIA

Use this contact first:
Division of Hotline and Correspondence
Pennsylvania Department of Public Welfare
P.O. Box 2675
Harrisburg, PA 17105-2675
Phone: (717) 787-3119
Fax: (717) 705-0040
Email: ra-dpwoimnet@pa.gov
Web: www.dpw.state.pa.us

Please send out-of-state requests by fax or secure e-mail on your state's letterhead and include the following: (1) Name of the household members who are applying for benefits (2) each members date of birth and last 4 of their social security number (3) the client's new address. Allow 3 to 5 business days for a response.

PUERTO RICO – See last page

RHODE ISLAND

Rhode Island Department of Human Services
57 Howard Ave
Louis Pastore Building
Cranston, RI 02920

Requests for verification must be in writing and faxed to:
Rhode Island IEVS Unit
Fax: 401-415-8563

Unit will respond to you by FAX. Please provide your fax number when submitting your request.

For PARIS Match:
Fax: 401-462-2175

WEB: http://www.dhs.ri.gov/

SOUTH CAROLINA

South Carolina Department of Social Services
Division of Family Assistance
P.O. Box 1520
Columbia, SC 29202-1520

Please email all out of state inquiries for **SNAP** and/or **TANF** to: **ClientServices@dss.sc.gov**
Subject line should read: 'Out of State Inquiry from 'name of state'
We will be unable to process your request without the following information:

1- **Individual's name, SS#, and current address**
OR
2- **Individual's name, last four digits of the SS#, date of birth, and current address**

If unable to email, please Fax: 803-898-1222

SOUTH DAKOTA

Department of Social Services
700 Governors Drive
Pierre, South Dakota 57501-2291
Phone: 1-877-999-5612 (toll free) or
1-605-773-3493 (direct)

Email: SNAP@state.sd.us

WEB: http://dss.sd.gov/foodstamps/

TENNESSEE

Food Stamp Policy
Department of Human Services
Citizen Plaza Bldg, 12th Floor
400 Deaderick Street
Nashville, TN 37248-7200

For Out-of-State Inquiries and PARIS Matches :
Must send a Fax to: (615) 687-5535
ON STATE LETTERHEAD, PLEASE INCLUDE THE FOLLOWING REQUESTED INFORMATION:
Your Name, Agency Name and Address, phone number and fax number
1) Names of household members applying for benefits in your State
2) Complete Social Security Numbers
3) A Current Address so that closure notices can be sent to the client

WEB: www.state.tn.us/humanserv/

TEXAS

Texas Health and Human Services Commission
Fax: 1-877-447-2839 (**Please submit one inquiry per page and fax each inquiry separately on agency letterhead.)**

OR

Phone: 1-877-541-7905 , *then select the following options from the Interactive Voice Response System:*

- *Option 1 for English;*
- *Option 2 for Your Texas benefit information;*
- *Option 1 for Medicaid, SNAP and TANF information;*
- *Option 1 to enter Head of household (HOH) Social Security number; –**OR-***
- *Option 3 if HOH information is unknown;*
- *Option 4 for other information;*
- *Option 2 for change status (caller will be routed to the next available agent); –**OR-***
- *Option 3 to hear benefit status information (caller will be routed to the next available agent)*

Note: Inquiries regarding TANF countable months are required via Fax.

UTAH

Department of Workforce Services
Eligibility Services Division
P.O. Box 143245
Salt Lake City, UT 84114-3245

Phone: 866-435-7414
Press Option 5 for Out-of- State inquires.

WEB: www.jobs.utah.gov

WEB: www.dhs.utah.gov (Dept. of Human Services)

VERMONT	VIRGINIA
Call Center Economic Services Benefits Service Center 103 South Main St Waterbury, VT 05671-1201 **Preferred:** Toll-free: 1-800- 479-6151. If 800# is not working, call (802) 828-6896 WEB: www.mybenefits.vt.gov (this site can be used, but not preferred).	Virginia Department of Social Services Division of Benefit Programs – 9th Floor 801 East Main Street Richmond, VA 23219-2901 WEB: http://www.dss.virginia.gov/benefit/foodstamp.cgi ****VIRGINIA NO LONGER ACCEPTS TELEPHONE REQUEST**.** Instead, please submit **ONE** request to the below email address. EMAIL: dssoutofstateinquiries@dss.virginia.gov (thru 02/28/15) EMAIL: VAoutofsteinquires@dss.virginia.gov (Effective 03/01/15) ***Please Include the Following:*** **1. Subject Line: 'Out of State Inquiry from 'Requesting State Name'** **2. Clients name, DOB, SSN (if last four only, you must provide entire DOB), and current address** **3. All household members who are applying for assistance in your state** ****If your email address is not recognized as a State or County agency you will be required to verify your identity in another manner**** If unable to send request via email, please send Fax to (804) 726-7357 or Fax: (804) 726-7669 Be sure to include the return information (your name, agency telephone number and agency fax number). Please allow 3 – 5 business days for a response which will be sent via the requested method. Please contact the following individuals if you need assistance or have not received your request within the allotted timeframe. **Maryellen O'Hare** Phone: (804) 726-7378 **Ronnita Hill (Supervisor)** Phone: (804) 726-7978 *****PARIS Matches: PARIS matches must use the contact information provided in the match*****

VIRGIN ISLANDS

Emmanueline Archer
Department of Human Services
Division of Family Assistance
1303 Hospital Ground, STE 1
St. Thomas, VI 00801-6722
Phone (340-774-0930 ext. 4309 or (340) 774-2399
Fax (340) 777-5449
Email: emmanueline.archer@dhs.vi.gov

WASHINGTON

STATE OF WASHINGTON - Direct out-of-state inquiries for SNAP, Medicaid and TANF and PARIS inquiries to:
Toll-free # (Preferred): 1-855-927-2747 or (1-855-WAPARIS)

FAX #: 1-888-212-2319

Mailing Address:
Department of Social and Health Services
Office of Program integrity and Quality Assurance
Attn: PARIS Unit
PO Box 45410
Olympia, WA 98504-5410

WEST VIRGINA

Department of Health & Human Resources
Division of Family Assistance
350 Capitol St., Room B-18
Charleston, WV 25301-3705
Phone: (304) 356-4619 (Request to speak to the Worker of the Day)

Email: DHHRbcfbenefitver@wv.gov
WEB: www.dhhr.wv.gov

WISCONSIN

Out-of-State Inquires should be directed to:
SNAP and HealthCare (MA):
WI Department of Health & Family Services
1 W Wilson St, Madison, WI 53703
Phone: (608) 261-6378--Option 3
Fax: (608) 267-2269
Email: DHSCARESCallCenter@wisconsin.gov
Applicant/Members should contact the county agency. To get the phone number of the agency, call 1-800-362-3002 or go to dhs.wi.gov/em/customerhelp.
WEB: http://dhs.wisconsin.gov/

TANF:
Phone: (608) 264-1656
Fax: (608) 327-6125
Email: Dcfw2careshd@wisconsin.gov

WEB: dcf.wisconsin.gov/w2/callcenter/default.htm

WYOMING

Annette Jones, Administrative Specialist
Department of Family Services
2300 Capitol Ave., Hathaway Bldg, Third Fl.
Cheyenne, WY 82002-0490
Phone: 1-307-777-5846 Fax: (307) 777-6276
Email: annette.jones@wyo.gov
WEB: http://dfsweb.state.wy.us/foodstampinfo.html

See below for Puerto Rico information and an email address to send revisions to the directory. Thank you!

***Puerto Rico** – For SNAP - Removed from National Directory of Contacts because they run an entirely separate Program from SNAP, called Nutrition Assistance Program (NAP). Duplicate participation is not a concern if a household is still receiving NAP benefits from Puerto Rico, as NAP benefits cannot be accessed in the US. Although 25% of Puerto Rico's NAP benefits are issued in a form readily converted to cash, the benefit cannot be converted to cash in mainland Automatic Teller Machines (ATMs). It is considered to be inaccessible for the SNAP eligibility process. Therefore, it is not necessary to verify NAP benefits or case closure for customers who were previously participating in Puerto Rico.
For TANF, contact Jeanette Rivera Escalera, 800 Ave. Ponce de León, Capitol Office Building, Miramar, PR 00907, PO Box 8000, San Juan, PR
00910-0800. Telephone: (787) 289-7600 Ext. 2408; FAX (787): 289-7614 or (787) 289-7621;
email:**communityrelations@adsef.pr.gov; or**
Jeanetterivera@adsef.pr.gov. Please include the physical address on all emails.
Web**: www.adsef.gobierno.pr**

9: SNAP Cheat Sheets

1: Processing Standards for Expedited Service

9.1 Processing Standards for Expedited Service

It is important that interviewers understand that even though the client is told he/she must call the Intake Center within 4 days, the client is entitled to expedited service if he/she calls within 6 days from the date of application.

The first day of the six day time frame begins the calendar day after the application/annual recertification form was received by the Agency. If the application/annual recertification form is not registered timely, the interviewer should document the date that the application/annual recertification form was registered as the reason for allowing expedited service outside of the 6 days.

In addition, if the interviewer has information that indicates that the client may not have received the notice in time to call the Intake Center or that the client may not have been able to get through to the interview center by the 6th day, good cause should be granted to the client and the case should be expedited if all other expedited criteria have been met. Examples include but are not limited to:

- Client files SNAP application on the Wednesday before Thanksgiving. Because the agency was closed Thursday- Sunday, the interview notice was not mailed to the client until the following Monday (day 5). Therefore, it would be very unlikely that the client would have received his/her notice to call by the 6th day. He should be given good cause for calling late and expedited, if he calls within a reasonable amount of time after the 6th day.

- Client files application December 10th and calls Intake Center on December 17th (the 7th day) and indicates that he has been trying to call but could not get through. As an interviewer, you are aware that SCOSA was down for one full day during the time frame that the client claims to have been trying to call and ESIC daily activity reports show that there was a wait time of an hour to get thru to the Intake Center on the 16th (the 6th day). This client should also be given good cause for calling after the 6th day and allowed expedited processing.

Interviewers should use prudent judgment when determining whether or not a client should be given good cause for calling after the 6th day for the interview. If good cause is granted, the specific circumstances warranting this should be documented in the case file before the case is processed.

We are aware that this may result in an untimely action, but in order to properly serve the client, the agency is willing to absorb this untimely when we have evidence that the failure to call by the due date is of no fault to the client.

Appendix I: SNAP Policy Manual Revisions

Vol 1 03/2009

N/A

Vol 2 04/2009

These changes are effective May 1, 2009

Tab to each blue section identifier (hypertext link) and press enter to go straight to the first changed item of the revised section.

Section 1.3 General Terms and Conditions. The second *"NOTE"* is deleted**.**

Section 2.3 (7) Ineligible Household Members. Clarification is added. *Ineligibility under this provision is limited to convictions based on behavior which occurred after August 22, 1996.*

Section 2.4 Head of Household. Section is deleted.

Section 3.3 Filing an Application for SNAP (1) E. The "*NOTE"* is deleted**.**

Section 3.3 Filing an Application for SNAP (4). The sentence *The Agency will post DSS Poster 2452, Food Stamps: Know Your Rights* is added.

Section 3.4 Household Cooperation in Filing an Application for SNAP. The sentence *The Agency will not consider individuals identified as non-household members in* ***Section 2.2: Special Household Requirements, (2) Elderly and Disabled Persons*** *as individuals outside the household* is deleted.

Section 3.5 Authorized Representatives. The sentence *Designation can also be accomplished by completing the Authorized Representative section on the DSS 3800, Application for Family Independence, Food Stamps and Other DSS assistance* is added.

Section 3.5 Authorized Representatives (3). In the last paragraph, the sentence *In order to prevent abuse of the program, the Agency sets a limit of five households an authorized representative may represent* is deleted.

Table of Contents. A listing of Chapter Titles was added for easier access to individual chapters.

Vol 3 07/2009

Tab to each blue section identifier (hypertext link) and press enter to go straight to the first changed item of the revised section.

These following changes are effective retroactive to 4/01/09:

Sec 4.1 Categorically Eligible Households Criteria for expanded categorically eligibility has changed to households whose gross income falls at or below 130% of the federal poverty level (FPL) or 200% of the FPL if all adult household members are elderly or disabled.

Sec 4.2 Households Prohibited from being Categorically Eligible Exception has been added to state that even these households will have their resources excluded even though their income will still be deemed.

Sec 4.4 Determining Categorically Eligible Households A paragraph has been added to explain how categorical eligibility is conferred.

Sec 4.5 Applicant Family Independence (TANF) Households The requirement that the DSS Brochure 24126 be given to applicant households has been removed.

These changes are effective 7/1/09:

Sec 2.3 Ineligible Household Members Contact information used to confirm fleeing felon status was added.

Sec 5.1(1) Verification Prior to Certification – Identity The term "head of household" was changed to "primary informant".

Sec 5.1(2) Verification Prior to Certification – Residency The last sentence was deleted as it is unnecessary.

Sec 5.1(5) Verification Prior to Certification – Disability Use of SDX and BENDEX was added to verification chart. Also last three paragraphs were removed as they were misplaced.

Sec 5.1(6) Verification Prior to Certification – Alien Eligibility A large section was removed as it is repeated in Chapter 7. Also a misleading paragraph was removed.

Sec 5.1(8) Verification Prior to Certification – Shelter/Utility Expenses A list was added to explain shelter expenses.

Sec 5.2 was moved to Sec 5.1(11)

Sec 5.3 was renumbered.

Sec 5.2(1) Sources of Verification – Documentary evidence First paragraph removed as it is repetitious. Last sentence removed as it is misleading.

Sec 5.3 Discrepancies in Verification Last paragraph removed as it is repetitious.

Sec 5.7(1) Verification Subsequent to Initial Certification – Recertification A paragraph in section B has been removed as it is repeated at the end of the section. Also section C and D have been combined.

Sec 7.3(1) Citizenship and Alien Status - Household members meeting citizenship or alien status requirements Information was added to the list of non-citizens who meet special non-citizen criteria.

Sec 8.2 Exemptions from Work Requirements Changed to clarify title IV of the Social Security Act includes Family Independence (FI).

Sec 10.1 Uniform Standards for SNAP Resource Eligibility Standards The section was removed and reference was added to see Chapter 4 as the information was redundant.

Sec 11.5(NN) Unearned Income - Social Security benefits Separated sentence to clarify recoupment income under the Federal Payment Levy Program.

Sec 11.5(OO) Unearned Income – SSI Exception added that pertains to representative payee.

Sec 12.2 Standard Deductions The chart was updated to reflect current amounts.

Vol 4 09/2009

Section 7.1 Residency Added exception that women and children in shelter for battered women can apply and be eligible in same month they are included in case with person who abused them.

Section 7.2 Social Security Numbers Changed the wording from “will complete” to “will assist as needed in completing” the SS-5.

Section 7.4 Students Added inclusion of on-line, web-based universities to definition of institution of higher education.

Chapter 10 Resource Eligibility Standards Moved to the **appendix**.

Section 11.3 Earned Income Updated the gross and net income eligibility standards.

Section 11.4 Self-Employment Income Expanded the different types of businesses and required verification for each type.

Section 11.8 Federal Law Income Exclusions Added to federally excluded income, income funded under Older Americans Act.

Section 12.1 Income Deductions/General Change to utility standards, MU from 221 to 272, BU from 109 to 134 and TE from 27 to 33.

Section 12.2 Standard Deduction Updated the amount of the standard deduction according to HH size.

Section 22.9 Inactive EBT Accounts Removed this section as these alerts are no longer generated.

Volume 5 December 2009

Section 2.3(7) Ineligible Household Members Added definition of "drug related felony".

Section 6.8 Certification periods for Expedited Households Clarification of when verification is due for expedited cases in which verification has been postponed.

Section 7.4(1) Students – Applicability Added note stating students with meal plans are not eligible for participation in the SNAP.

Section 11.8 (G) Federal Law Income Exclusions Added Exclusion of payments to certain Filipino WWII veterans.

Section 12.7 Child Support Deduction Clarified treatment of obligated child support payments as a deduction.

Section 13.9(1)(C) Clarification Notices to Households – Initial applications, **Section 15.5 (1)(B) Actions on Reported Changes**, **Section 15.8(A) Unclear Information** Clarification added that if a request for information must be translated, the time frame for response must begin from the date the translated request was mailed to the household.

Section 22.8 (D) Authorizing Replacements for Household Misfortunes Clarified definition of household misfortune.

Volume 6 February 2010

Section 11.3(Q) Earned Income – On the job training program Renamed due to removal of entry entitled On-the-job Training programs

Section 11.3 (CC) Earned Income – WIA educational and training programs Added to give more information regarding WIA educational and training programs

Section 11.8 (B) Federal Law Income Exclusions – Allowances, earnings or payments Added rule to exclude WIA payments unless payment is related to on-the-job training program.

Section 11.8 (S) Federal Law Income Exclusions - Weekly $25 Supplement Added rule to exclude UCB $25 stimulus income. This income will no longer be included in the SNAP budget.

Section 15.3(1) Simplified Reporting Households – Annual (12 month) reporting households and **Section 15.3(2) Simplified Reporting Households – Semi-annual (6 month) reporting households** Changed to read "elderly or disabled" rather than "elderly and disabled".

Section 15.7 Action on Simplified Reporting Households Changed to add sentence explaining what must be included when notifying household of incomplete simplified report form.

Volume 7 March 2010

Section 3.3(2) Filing An Application For SNAP – Contacting the SNAP Office Re-worded this section to accommodate procedures using SCOSA.

Section 3.7 Interviews Changed to clarify procedures.

Section 7.3 (1) Citizenship and Alien Status – Household member meeting citizenship or alien status requirements Policy has changed to allow Iraqi and Afghani special immigrants to be treated the same as refugees. They are eligible for SNAP indefinitely and with no waiting period.

Section 11.3 (C) Earned Income – AmeriCorps State and National and **(D) Earned Income – AmeriCorps VISTA** Clarified policy by adding AmeriCorps and AmeriCorps Vista as separate types of income.

Section 11.3 (I) Earned Income – Earned Income – Census Income for temporary employees connected with the 2010 Census Policy has changed so Census income for temporary workers connected to the 2010 census was added to earned income chart with note that this income is excluded.

Section 11.3 (L) Earned Income – Domestic Service Act payments (includes University Year for Action, Urban Crime Prevention Program, VISTA) Re-worded to add clarification.

Section 11.3 (T) Earned Income – Repayment – Voluntary or involuntary return of monies owed Added to include statement that repayments from earned income source is excluded.

Section 13.1 Determining Household Eligibility and Benefit Levels – Prospective Eligibility Policy has been changed regarding calculating prospective income. The change allows more flexibility in what verification may be used.

Section 17.2 Recertification Interview Changed to clarify procedures. We will use the same telephone interview procedures for recertifications as we do for applications.

Section 19.1 Federal Demonstration Projects – Definition of the South Carolina Combined Application Project (SCCAP) and **19.2 Federal Demonstration Projects – Eligibility Determination for the South Carolina Combined Application Project (SCCAP)** this section was revised to give expanded and updated information regarding the SCCAP program.

Volume 8 August 2010

Section 7.3 (1) Citizenship and Alien Status-Household members meeting citizenship or alien status requirements This section was expanded to accommodate the Farm Security and Rural Investment Act of 2002; Final Rule.

Section 7.3 (2) (D) Citizenship and Alien Status-Sponsored Aliens This section was expanded.

Section 7.3 (2) (F) Citizenship and Alien Status-Sponsored Aliens This section was added.

Section 7.3 (2) (G) Citizenship and Alien Status-Sponsored Aliens This section was added.

Section 12.5 (2) (C) Utility Allowances – Mandatory Utility Allowance (MUA) BG was changed to household.

Section 12.5 (2) (G) Utility Allowances – Mandatory Utility Allowance (MUA) Additional criteria was added on who may receive the MUA.

Section 12.5 (2) (H) & (I) Utility Allowances – Mandatory Utility Allowance (MUA) Sections were renumbered to reflect the addition of (G).

Section 12.5 (2) (I) Utility Allowances – Mandatory Utility Allowance (MUA) This section was removed.

Section 12.5 (3) (C) Utility Allowances –Basic Utility Allowance (BUA) This section was removed.

Section 12.5 (4) (A) & (B) Utility Allowances – Actual Utility Costs These sections were removed.

Section 12.5 (5) Utility Allowances –Multiple households/ multiple residences This section has been revised to remove the option of prorating the MUA and BUA.

Section 15.3 Simplified Reporting Households This section has been expanded.

Section 15.5 (2) Actions On Reported Changes – Decrease in benefits This section was changed to clarify that the decrease rules only apply once the determination is made that the decrease is to be acted on.

Section 17.2 Recertification Interview This section was revised to accommodate telephone interviews at recertification.

Section 17.3(2)(A) Processing Application for Recertification – Untimely recertifications This section defines the required actions the recipient must complete at recertification. It also explains that if an application for recertification is denied because the household failed to take a required action, the application can be reopened but benefits will be prorated from the date the last action is taken.

Section 18.5 (2) Responsibilities Regarding the Fair Hearing Process - Responsibilities of the Certification Supervisor Removed the requirement that the supervisor sign the DSS 2633, Request for Fair Hearing.

SNAP Tool Kit4: Acceptable Verification of Alien Eligibility This section was expanded to accommodate the Farm Security and Rural Investment Act of 2002; Final Rule.

Volume 9 September 2010

Section 13.8 Certification Periods (1) Certification period length Certification period is 6 months for all households except those households in which all members are elderly or disabled.

Section 15.3 Simplified Reporting Households Changed semi-annual to six month recertification.

Section 15.3 Simplified Reporting Households (1) Annual (12 month) reporting households Removed section heading; This paragraph explains the reporting requirements for households assigned a 24 month certification period.

Section 15.3 Simplified Reporting Households (2) Semi-annual (6 month) reporting households Removed section heading. This paragraph explains that households other than those assigned a 24 month certification period will be assigned a six month certification period.

Section 15.6 Registration of Simplified Reporting Forms The section title was eliminated. The paragraph discusses the reporting requirement for households assigned a 24 month certification period.

Section 15.6~~7~~ Action on Simplified Reporting Households The section title was eliminated. The paragraph states households other than those assigned a 24 month certification period will report changes at the six month recertification and the annual recertification, unless the household's income exceeds 130% of poverty or moves out of state.

Sections 15.8 & 15.9 These sections were renumbered due to the elimination of section 15.6

Section 17.1 Recertification Process Phrase added to indicate only one interview needed every twelve months

Section 17.1 Recertification Process (2) Recertification Application This verbiage in this section was changed to specifically state that a recertification will be completed every six months. The "S" form is used to complete the six month recertification, and the "A" form will be used to complete the annual recertification.

Section 17.2 Recertification Interview Procedure box edited to make procedure more accurate.

Volume 10 February 2011

Section 11.4 Self-Employment Income (2) Determining self-employment income This section was clarified to include income shown on line 6 should be added to the income shown on line 3 before applying the 40% cost of doing business.

Section 12.2 (A) Standard Deduction The standard deduction for 1 – 3 person households changed from $141 to $142.

Section 14.4 Residents of a Group Living Arrangement (GLA) The number of residents that can be served by a GLA has been corrected from 6 to 16.

Volume 11 March 2011

Section 1.7 Actions on Cases of Relatives This section has been added to clarify how cases of employees' relatives should be handled.

Section 5.1 (9) Medical Expenses The word "outstanding" was added to clarify that the amount of outstanding medical expenses will be verified prior to initial certification.

Section 5.5 Income Verification Eligibility System (IEVS)/State Eligibility verification System (SVES) A paragraph was added to this section to clarify that IEVS/SVES matches are mandatory at initial certification and recertification.

Section 7.4 Students (2) Student Exemptions A correction was made to item (I) to change the word "*and*" to "*or*".

Section 11.5 (DD) Unearned Income This section was clarified to include reimbursements or flat allowances for work related expenses such as travel, per diem, and uniforms as excludable.

Section 11.8 (T) Federal Law Income Exclusions This section was corrected to add the Earned income Tax Credit (EIC) as an income exclusion.

Section 12.8 Excess Medical Deduction Clarification was added to this section to include credit card charges and loans for medical expenses as allowable deductions.

Section 12.8 Excess Medical Deduction (1) Non-recurring Medical Expenses This section has been updated to remove reference to 10 day reporting households; to change semi-annual reporting households to households subject to 6 month recertification; and to change simplified reporting to households in which all members are elderly or disabled with no earned income.

Section 13.6 Calculating Net Income and Benefit Levels (2) Eligibility The link to the definition of elderly or disabled has been changed to 14.10 Elderly and Disabled.

Section 14.10 Definition of Elderly or Disabled This section was added to define elderly or disabled.

Section 15.4 (2) Interim Changes Reported by the Household That Must be Acted on This section has been changed to include household members removed from a SNAP household by CPS or APS as a change that must be acted on when **reported** by the household or CPS/APS.

Section 15.5 Actions on Reported Changes (2) Decrease in Benefits Sentence re-worded for clarity.

Section 17.2 Recertification Interview Sentence re-worded for clarity and to specify that households who miss interviews and request another interview must be scheduled another interview.

Volume 12 May 2011

Section 1.3 General Terms and Conditions (2) No Sales Tax on SNAP Purchases The word "groceries" has been replaced with the term "eligible foods".

Section 1.4 Informational Activities (2) Rights and Responsibilities Sentence reworded.

Section 2.2 Special household Requirements (3) Boarders Wording was added to this paragraph to clarify that it pertained to individuals paying a reasonable amount for meals or meals and lodging who were **not** living in a commercial boarding house.

Section 2.3 Ineligible Household Members The order of items 6, 7, and 8 was changed

Section 5.1 Verification Prior to Certification (6) Alien Eligibility This section has been clarified to include verification of the validity of INS documents through the SAVE database.

Section 11.3 Earned Income (Q) Foster Grandparent Programs This section was added to indicate that these programs are exempt if the program has been approved by the Corporation for National and Community Service

Section 11.3 Earned Income (W) Retired and Senior Volunteer Programs This section was added to indicate that these programs are exempt if the program has been approved by the Corporation for National and Community Service

Section 11.3 Earned Income (Y) Senior Companion Programs This section was added to indicate that these programs are exempt if the program has been approved by the Corporation for National and Community Service

Section 11.5 (DDD) Unearned Income Exception reworded for clarity.

Section 15.4 Interim Changes for Simplified Reporting Households (3) Other interim changes reported by the household A note has been added to the section reminding EWs to consider the effect of all changes when determining whether to act on a change.

Section 15.5 Actions on Reported Changes (2) Decrease in Benefits Item A has been corrected to clarify that appropriate notice must be given when acting on mandatory changes which decrease benefits.

Section 17.3 (1) Processing Applications for Recertifications (1) Timely Recertifications The note in this section has been corrected to remove the sentence, "*benefits will be prorated from the date the last required action is taken."* A link to the recertification charts in the SNAP Tool Kit has also been added.

Section 17.3(2) Processing Applications for Recertifications (2) Untimely Recertifications This section has been reformatted and the note in this section has been corrected to remove the sentence *"benefits will be prorated from the date the last required action is taken."* A link to the Recertification Charts in the SNAP Tool Kit has also been added.

Section 17.3(3) Processing Applications for Recertifications (3) Late Recertifications This section has been created to define a rectification form received after the current certification period ends but within the calendar month after the end of the certification period as "late".

SNAP Tool Kit Attachment 4: Acceptable Verification of Alien Eligibility A sentence has been added to clarify that the validity of the documents listed must be verified through the SAVE database

SNAP Tool Kit Attachment 5: SNAP Annual Recertification Chart This chart has been added to the toolkit. Corrections noted at the April 2011 SNAP training have been integrated and expedited screening and processing has also been added to the late recertification section.

SNAP Tool Kit Attachment 5: SNAP Six Month Recertification Chart This chart has been added to the toolkit. Expedited screening and processing has also been added to the late recertification section.

Volume 13 June 2011

Section 3.2 SNAP Application Form The subheadings in this section have been changed for clarity and the title and contents of the SNAP application have been corrected to be consistent with the revised DSS-3800.

Section 3.3 Filing an Application for SNAP (3) Availability of the SNAP Application Form Section reworded for clarity.

Section 3.3 Filing an application for SNAP (4) Notice of Right to File Title of poster corrected.

Section 5.1 Verification Prior to Certification (6) Alien Eligibility A link to the US Citizenship and Immigration website has been added to access the INS form G-845 (Document Verification Request).

Section 7.3 Citizenship & Alien Status (1) Household Members meeting Citizenship or Alien Status Requirements A note has been added to clarify that Asylees and Refugees who attain LPR status are exempt from the LPR 5 year residency requirement

Section 14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA's) (1) DAA Eligibility for SNAP Wording changed from may to must.

Section 14.4 Residents of a Group Living Arrangement (GLA) (6) GLA's Misuse of Benefits Section has been corrected to replace DAA with GLA

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP) Standard benefit amounts have been updated and the threshold for shelter high was updated. These changes were made effective 04/11

SNAP Tool Kit Attachment 1: Accommodation Assessment for LEP Clients The DSS 2664 Instruction and Training Guide has been replaced with the revised Guide provided by Individual and Provider Rights.

SNAP Tool Kit Attachment 2: Important Points for LEP/SI Clients The Economic Services Basic Training Handout, dated 02/09 has been replaced with the revised handout provided by Individual and Provider Rights.

SNAP Tool Kit Attachment 4: Acceptable Verification of Alien Eligibility Additional examples of alien verification have been added as well as other information to ease use of the toolkit.

Volume 14 August 2011

Section 2.3 Ineligible Household Members A note has been added to item 6 to clarify that the operative date when looking at felony drug convictions is the date of the crime itself rather than the date of the conviction.

Section 5.1 Verification Prior to Certification (8) Shelter/Utility Expenses A paragraph has been added to this section to clarify how to handle shelter/utility expenses that cannot be verified within 30 days of the date of application.

Section 5.1 Verification Prior to Certification (9) Medical Expenses Additional clarification has been added regarding verification and treatment of recurring and nonrecurring medical expenses at initial certification.

Section 5.7 Verification subsequent to Initial Certification (1) Recertification Medical Expenses have been removed from Item "B" and Item "F" has been created as a separate item for medical expenses. Additional instructions for verification of medical expenses at 6 month recertification and annual recertification have also been added to be consistent with the reference guide provided at the SNAP Regional Training.

Section 8.5 Disqualification Periods for Failure to Comply with SNAP Work Requirements Wording in this section has been revised to reduce misinterpretation of policy. A note has also been added to define *compliance.*

Section 11.6 Income Exclusions Loans and Lump Sums have been added to this section as income exclusions.

Section 12.8 Excess Medical Deduction Age 60 has been added for clarity of definition of elderly.

Section 12.8 Excess Medical Deduction (1) Nonrecurring Medical Expenses This section has been re-worded for clarity and consistency with the reference guide provided at the SNAP Regional Training.

SNAP Tool Kit Attachment 5: SNAP Annual Recertification Chart Corrections have been made to both the instructions and examples (for treatment of untimely and late recertifications) to reflect that clients have 30 days from the date the recertification form is received to complete the recertification process. Additional clarifications have also been added for treatment of untimely and late recertifications.

Volume 15 October 2011

Section 8.5 Disqualification Periods for Failure to Comply with SNAP Work Requirements verbiage has been added to this section to clarify that SNAP recipients who are sanctioned for failure to comply with FI work requirements must comply with these requirements or become exempt from them in order to become eligible for SNAP.

Section 12.1 Income Deductions/General The maximum excess shelter deduction has changed to $459

Section 12.2 Standard Deduction The standard income deduction for a household of 1-3 has changed to $147

Section 12.4 Shelter Deduction The link has been changed from Section 2.2 (Special Household Requirements (2) Elderly and Disabled Persons) to Section 14.10, Definition of Elderly or Disabled.

Section 13.6 Calculating Net Income and Benefit Levels (2) Eligibility This section contains changes in the gross and net income limits effective 10/1/11

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP) This section contains changes in the shelter thresholds for "shelter high" and "shelter low" SCCAP households.

SNAP Tool Kit Attachment 5: Annual Recertification Chart A correction was made to the instructions for treatment of untimely annual recertifications (able to reach client for interview- incomplete) to indicate that if the client provides verification within 30 days from the date the form was received or 10 days from the date the verification was requested he/she is entitled to a full allotment.

Volume 16 December 2011

Section 11.1 Income Eligibility Standards The net and gross income chart in this chapter has been updated to be consistent with that of chapter 13 which was updated effective 10/1/11.

Section 12.1 Income Deductions/General (D, E, and F) The Mandatory Utility Allowance, Basic Utility Allowance, and Telephone Standard have been updated. This change is effective 12/1/11.

Section 12.2 Standard Deduction The standard deductions for a household of 4, 5, and 6 and above have been updated. This change was made effective 10/1/11.

Section 16.3 Adequate Notice When the Household's Address is Unknown A note has been added to this section to clarify that case closures are only appropriate when the returned mail is a SNAP approval notice.

Volume 17 February 01, 2012

Section 8.2 Exemptions from Work Requirements This section has been revised to clarify SNAP work registration requirements.

Section 8.3 The Agency's Responsibilities for Work Registration A paragraph has been added to clarify work registration for simplified reporters who lose their exemption status.

Section 8.4 E & T program Referrals This section has been created to introduce implementation of mandatory participation in the employment and training program for ABAWDs in specified counties.

Section 8.6 Disqualification Periods for Failure to Comply with SNAP Work Requirements This section has been re-worded for clarity

Section 9.1 The SNAP Employment and Training Program (E&T) This section has been revised to add mandatory participation in E&T for ABAWDS residing in Richland, Lexington, Charleston, Berkeley, and Dorchester counties.

Section 9.3 Referrals to the SNAP Employment and Training Program (E&T) This section has been revised to outline the E&T referral process for Mandatory participants and for Volunteers.

Section 9.3 Failure to Comply with SNAP Employment and Training Requirements This section defines noncompliance in E&T and outlines notification and disqualification periods for failure to comply with SNAP E&T requirements.

Section 9.5 SNAP Employment and Training Components This section defines components for SNAP E&T

Section 9.6 Reimbursement Funds for Employment and training Program Participants This section provides recommendations for expenditure of transportation reimbursement funds for E&T.

Section 9.7 Record Keeping for the Employment and Training Program Goodwill of South Carolina has been added as the entity that will record E &T component participation for mandatory ABAWDs.

Section 15.4 Interim Changes for Simplified Reporting Households (1) Interim Changes Considered Known to the Agency This section has been changed to include DHEC Death Match as an interim change considered known to the agency that must be acted on.

Section 15.4 Interim Changes for Simplified Reporting Households (2) Interim Changes Reported by the Household That Must be Acted on Item B has been changed from "Death of all household members" to "Death of **any** household members" as a change that must be acted on when reported by the household.

Section 19.1 Definition of the South Carolina Combined Application Project Standard SCCAP benefit amounts have been updated to reflect changes made effective January 2012 as a result of the Cost of Living Increase (COLA).

Section 19.4 Exception to South Carolina Combined Application Project (SCCAP) Eligibility The medical expense threshold for opting out of SCCAP has increased from $35 to $50. This increase was effective January 2012. This section has also been reworded for clarity.

Volume 18 April 1, 2012

Section 3.7 Interviews The procedure for interviewing households who have filed applications has been re-defined to be consistent with Directive Memo D11-27, New Supplemental Nutrition Assistance Program (SNAP) Policy for Scheduling Telephone Interviews.

Section 9.3 Failure to Comply with SNAP Employment and Training Requirements (2) Notice of Adverse Action Verbiage has been added to specify that change reporting policy (re: increase/decrease) in Section 15.4 does not apply when sanctioning for failure to comply with SNAP E &T.

Section 11.3 Earned Income (Z) Sick Pay Benefits Paid by Employer A note has been added to this section along with a link to clarify that sick pay benefits paid by a source other than the employer (such as an insurance company) should be treated as unearned income.

Section 11.3 Earned Income (M) Educational Assistance Exempts educational assistance in accordance with SC Medicaid policy

Section 11.5 Unearned Income (G) Deferred Payment Loans for Education This is no longer considered unearned income

Section 11.7 Educational Assistance This section has been changed to exercise the state option to exclude educational assistance in accordance with SC Medicaid rules and outlines the educational assistance that is excluded.

Section 15.5 Actions on Reported Changes (2) Decrease in Benefits the phrase "or all adult household members have died" has been added to the first paragraph in this section to point out that cases should be closed when all adults in the household have died.

Section 17.2 Recertification Interview The procedure for interviewing households who have filed annual recertifications has been re-defined to be consistent with Directive Memo D11-27, New Supplemental Nutrition Assistance Program (SNAP) Policy for Scheduling Telephone Interviews.

Volume 19 May 1, 2012

Section 1.3 General Terms and Conditions (6) Retention of Records Verbiage has been added to specify that eligibility records should be kept for four (4) years from the current date.

Section 7.4 Students (2) Student Exceptions A link has been added to item "k" which takes the user to the E&T components section (Section 9.5).

Section 8.4 E&T Program Referrals This section has been revised to add mandatory participation in E&T for ABAWDs residing in 10 additional counties.

Section 9.1 SNAP Employment & Training Program This section has been revised to add South Carolina Department of Employment and Workforce as a partner to assist ABAWDs in securing employment, and to add mandatory participation in E&T for ABAWDs residing in 10 additional counties.

Section 9.2 Referrals to the SNAP Employment and Training Program Anderson, Beaufort, Cherokee, Darlington, Georgetown, Greenville, Greenwood, Lancaster, Orangeburg and Sumter counties have been added to the list of counties mandatory for E&T by ABAWDs.

Section 9.3 Failure to Comply with SNAP Employment and Training Requirements This section had been revised to include 10 additional mandatory E&T counties for ABAWDs as well as to add DEW as a provider.

Section 11.5 Unearned Income (OO) Social Security Benefits (SSA) This section has been corrected to specify that certification workers should use the "Total Net Amount" field on BDX for social security income.

Volume 20 October 1, 2012

Section 3.7 Interviews This section has been amended to include telephone interviews as a method for conducting initial interview with SNAP applicants. Procedures for the new On Demand interview process have also been added.

Section 6.8 Certification Periods Verbiage has been added to this section to clarify that certification workers must set an alert in CHIP which instructs workers to close the case if the verification is not received within 30 days from the file date.

Section 8.6 Disqualification Periods for Failure to Comply with SNAP Work Requirements Clarification has been added to the note in this section to specify how the client initiates work registration.

Section 8.11 Voluntary Quit and Reduction of Work Effort (4) Determining Whether a Voluntary Quit or Reduction of Work Effort Occurred. This section has been updated to clarify that voluntary quit sanctions should be imposed the month following the month the voluntary quit occurred and was verified.

Section 11.1 Income Eligibility Standards The gross and net monthly income limits have been updated for FFY2013.

Section 12.1 Income Deductions The maximum excess shelter deduction, the Mandatory Utility Deduction (MUA), and Basic Utility Deduction (BUA) have been updated.

Section 12.2 Standard Deduction The standard deduction has been updated for all household sizes.

Section 12.7 Child Support Deduction The words "court ordered" have been added to this section to specify that a deduction is allowed for arrearages that are court ordered.

Section 12.8 Excess Medical Deduction Item "C" in the chart has been updated to specify that a medical deduction cannot be allowed for prescribed drugs if they are considered illegal under federal law.

Section 13.6 Calculating Net Income and benefit Levels (2) Eligibility The gross and net monthly income limits have been updated for FFY 2013.

Section 14.1 Treatment of Income and Resources of Certain Non-household Members (3) Ineligible Alien An exception has been added to this section and a link to section 12.5(5) to clarify that the MUA and BUA are not prorated among eligible household members when there is an ineligible alien in the household.

Chapter 15, Change Reporting Requirements Change reporting requirements for simplified reporters has been clarified and corrected to indicate that simplified reporters are only required to report when their income exceeds 130% of poverty. The requirement to report when they move out of state has been removed.

Section 15.4 Interim Changes for Simplified Reporting households (3) Other Interim Changes Reported by the Household. An exception has been added to this section to clarify that voluntary quit sanctions should be acted on regardless of the effect it has on the benefits.

Section 16.3 Adequate Notice When the Household's Address is Unknown This section has been changed to indicate that no action will be taken on mail (including initial approval notices) directed to a household has been returned until the next mandatory rebudget of the case.

Section 17.2 Recertification Interview This section has been amended to include procedures for the new "On Demand" interview process.

Section 18.8 Scheduling the Fair Hearing A phrase has been added to specify that a copy of the hearing *notification* will also be sent to the certification worker, supervisor and county director in both the residence county as well as the county where the action was taken.

Section 18.9 Fair Hearing Process This section has been revised to include fair hearing procedures for the Regional Specialized Workload (RSW) process.

Section 18.12 Fair Hearing Decision (2) Notification A phrase has been added to specify that a copy of the hearing *decision* will also be sent to the certification worker, supervisor and county director in both the residence county as well as the county where the action was taken.

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP) SCCAP thresholds/opt out limits for shelter high and shelter low have been adjusted.

Section 23.3 Classification of Recipient Claims (2) Inadvertent Household Error This section has been reformatted for clarity by eliminating item "C" and creating a separate paragraph for this information.

Volume 21 March 1, 2013

Section 5.1 Verification Prior to Certification (9) Medical expenses A sentence was added explaining how to treat non-recurring medical expenses.

Section 6.6 Processing Standards for Expedited Service Added verbiage that clarifies that both the interview and the processing of the application must be completed within the expedited timeframe.

Section 6.8 Certification Periods for Expedited Households The word "postponed" has been added for clarity.

Section 7.4 Students (1) Applicability A box has been added to provide hints for determining if someone is subject to student eligibility criteria.

Section 11.5 Unearned Income (OO) Social Security benefits This section has been corrected regarding recoupments and a link added to clarify how to treat recouped Social Security income.

Section 11.5 Unearned Income (PP) Supplemental Security Income benefits A link has been added to clarify how to treat recouped Supplemental Security Income. An exception was added to indicate the field on SDX that should be used when making a SCCAP eligibility determination.

Section 11.5 Unearned Income (RR) Third party payments/vendor payments An exception has been added to exclude from the SNAP budget of a military retiree, income diverted to an ex-spouse under the Uniformed Services Former Spouse Protection Act.

Section 11.6 Income Exclusions (L) Income exclusion has been added where income diverted to an ex-spouse under the Uniformed Services Former Spouse Protection Act in the budget of a military retiree is excluded.

Section 12.8 Excess Medical Deduction The phrase "out-of-pocket" was added for clarity

Section 12.8 Excess Medical Deduction (F) Verbiage has been added to clarify the medical deduction pertaining to service animals.

Section 14.8 Treatment of FI Sanctions in the SNAP Added link to Section 8.5

Section 15.4 Interim Changes for Simplified Reporting Households (2) Interim changes reported by the household that must be acted on This section has been changed to clarify that reports received by the agency from another SNAP agency, that clients have moved out of state must be acted on, regardless of whether the change causes an increase or decrease in the SNAP allotment.

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP) Reflects the new benefit amounts effective January 2013 due to SSA Cost of Living Adjustments and the changes to the SCCAP definition in which clients with excess medical over $50 and legally obligated child support may opt out.

Section 19.2 Eligibility Determination for the South Carolina Combined Application Project Verbiage has been added to define the field on SDX that should be used when making a SCCAP eligibility determination.

Section 22.8 Authorizing Replacements for Household Misfortunes The word "calendar" has been added to clarify the length of time in which the agency must replace an EBT card due to a household misfortune.

Volume 22 May 1, 2013

Section 5.5 Income Verification Eligibility System (IEVS)/ State Eligibility Verification System (SVES) This section has been changed to clarify the interfaces and query systems that must be reviewed prior to certification.

Section 5.7 Verification Subsequent to Initial Certification Policy has changed whereby a reported change in actual rent/ mortgage expenses at recertification will not require verification if equal to or less than $25.

Section 6.6 Processing Standards for Expedited Service added a note explaining the circumstances in which a client can lose entitlement to expedited services.

Section 7.4 Students An exception has been added to the hints for determining whether a person is subject to Student Eligibility Criteria which explains that verification of student status is unnecessary if an individual meets obvious student exemption.

Section 8.4 E&T Program Referrals This section has been amended to add mandatory participation of ABAWDs in participating counties to the SNAP 2 WORK Program.

Section 9.1 SNAP 2 WORK Program This section has been revised to reflect that South Carolina's E&T Program, SNAP 2 WORK, had defined an ABAWD to household members 18-35 who are able bodied and have no dependents.

Section 9.2 Referrals to the SNAP 2 WORK Program This section has been amended to reflect the process certification staff must follow when making a referral to the SNAP 2 WORK Program.

Section 9.3 Failure to Comply with SNAP 2 WORK Program Requirements This section has been amended to explain the repercussions of a client's non-compliance in the SNAP 2 WORK program.

Section 9.5 SNAP 2 WORK Program Components This section defines the components offered with the SNAP 2 WORK Program.

Section 9.7 Record Keeping for the SNAP 2 WORK Program This section explains that case managers and providers will record SNAP 2 WORK participation.

Section 11.4 Self-employment Income (2) Determining self-employment income Explains how self-employment income is prorated if ownership in a partnership is not equal

Section 11.5 Unearned Income (PP) Supplemental Security Income (SSI) benefits Clarifies that unearned income and in-kind income must be counted in addition to SSI when determining SCCAP eligibility.

Section 11.5 Unearned Income (DDD) Withdrawals (regular) from resources for categorically eligible HHs This is no longer considered unearned income

Section 12.3 Earned Income Deduction Clarifies the type of income disregarded.

Section 12.8 Excess Medical Deduction (G) The word "personal" has been added for clarity.

Section 13.2 Determining Household Eligibility Formula to determine a prorated benefit amount for an initial month has been added.

Section 16.2 Exemptions from Notice An exception was added explaining that client who receive an annual adjustment to SSA, SSI or other federal benefits (i.e. Cost of Living Adjustment) must be given an adverse action notice prior to terminating or reducing a client's benefits.

Section 19.2 Eligibility Determination for the South Carolina Combined Application Project (SCCAP) Clarifies that unearned income and in-kind income must be counted in addition to SSI when determining SCCAP eligibility.

Section 19.4 Exception to South Carolina Combined Application Project (SCCAP) Eligibility This section has been revised to reflect that households meeting the definition of SCCAP must only verify that expenses were "incurred" by the individual.

CHAPTER 31 Federal Tax Information This chapter has been added to define Federal Tax Information (FTI), how to treat FTI and the process and penalties if FTI is improperly disclosed.

SNAP Tool Kit 7: SNAP 2 WORK Referral Guide This section has been added to reflect the current referral contact information for mandatory SNAP 2 WORK counties.

Volume 23, November 2013

Section 2.2 Special Household Requirements An income chart has been added to use in determining separate household eligibility for elderly or disabled persons that are unable to eat and prepare meals separately from others living in their home.

Section 2.3 Ineligible Household Members Clarification added regarding expunged or pardoned felony drug convictions

Section 8.2 Exemptions from Work Requirements This section has been clarified to specify that exemptions from work requirements should be reviewed when new household members are added.

Section 8.4 E&T Program Referrals This section has been clarified to specify the SNAP 2 WORK referral process.

Section 9.1 The SNAP E&T Program The age of an ABAWD has been redefined as a household member at least 18 years old but under age 50

Section 9.2 E&T Program Exemptions The E &T specific exemptions have been added.

Section 9.3 Referrals to the SNAP Employment and Training Program (E&T) This section has been clarified to specify the SNAP 2 WORK referral process.

Section 9.4 Failure to comply with SNAP 2 WORK Program Requirements The disqualification periods for failure to comply with SNAP 2 WORK have been clarified.

Section 11.1 Income Eligibility Standards The table containing the gross and net monthly income limits has been updated for FFY 2014.

Section 11.4 Self-Employment Income has been reworded and reformatted to clarify how self-employment income is prorated if ownership in a partnership is not equal.

Section 12.1 Income Deductions The maximum excess shelter deduction, the Mandatory Utility Deduction (MUA), and Basic Utility Deduction (BUA) have been updated.

Section 12.2 Standard Deduction The standard deduction has been updated for all household sizes.

Section 13.6 Calculating Net Income and Benefit Levels The table containing the gross and net monthly income limits has been updated for FFY 2014.

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP) SCCAP thresholds/opt out limits for shelter high and shelter low have been adjusted.

Section 31.5 Reporting of Improper Disclosures The specific process which must be followed when FTI has been improperly disclosed has been corrected.

SNAP Tool Kit 7: SNAP 2 WORK Referral Guide: The SNAP 2 WORK referral guide has been updated to reflect the current referral contact information for mandatory SNAP 2 WORK counties.

Volume 24, January 2015

Section 2.2(1) Required Household Combinations – Spouses: This section has been updated in accordance with the Agricultural Act of 2014 to indicate that same sex spouses living together must be considered married for SNAP purposes if their marriage is recognized in the jurisdiction where the marriage occurred.

Section 5.1(6) Verification Prior to Certification, Alien Eligibility: A link has been added to refer to Section 7.3, Citizenship and Alien Status, for a description of citizens and noncitizens who may be eligible to participate in SNAP.

Section 6.6 Processing Standards for Expedited Service: Clarification has been added to the note in this section to indicate that households who meet the criteria for expedited services do not lose their entitlement to these services when they do not call by the 6th day if the delay is a result of an agency caused delay.

Section 7.3 Citizenship and Alien Status: This section has been condensed and simplified to aid in identifying which non-citizens must meet additional special SNAP non-citizen criteria, and which qualified non-citizens do not have to meet additional requirements. This section is intended to be used in conjunction with SNAP Tool Kit #4 in order to determine what specific documents are acceptable to verify immigration status.

Section 7.4(2) Student Exemptions: Verbiage has been added to this section to clarify the "physically or mentally unfit" exemption.

Section 12.1: Income Deductions: The maximum excess shelter, MUA, and BUA amounts have been updated to reflect increases effective 10/01/14

Section 12.2 Standard Deduction: Standard deduction amounts have been updated to reflect increases effective 10/1/14

Section 12.4(1) Excess Shelter Deduction: Verbiage has been added to this section to clarify that households which **do not** contain an elderly or disabled member are entitled to a limited shelter deduction. A link to the maximum excess shelter amount has also been added.

Section 12.5(2) Mandatory Utility Allowance (MUA): Item B has been changed to reflect new Farm Bill provisions regarding allowing the MUA based on receipt of LIHEAP.

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP): This section was updated to change the new SCCAP income limits and shelter low and high thresholds.

Section 19.6 Responsibility for South Carolina Combined application project (SCCAP) Households: This section was changed to add "except when address on SDX is that of a representative payee".

SNAP Tool Kit Attachment 4: This document has been replaced with new charts to match the condensed charts in 7.3, Citizenship and Alien Status.

SNAP Tool Kit Attachment 7: The SNAP 2 Work Referral Guide has been replaced with an updated version dated 10/30/14

Volume 25 April 2015

Section 2.2 (1) Required Household Combinations: A sentence was added to clarify that an 18 yr. old who is included in the FI budget of an adult relative must be included in the same SNAP household as the adult relative.

Section 8.11 (4) Determining whether a voluntary quit or reduction of work effort occurred: A sentence has been reworded for clarity.

Section 11.1 (2) Net Income Eligibility Standards: The table containing the gross and net monthly income limits has been updated for FFY 2015.

Section 11.7 Educational Assistance: This section has been updated to show that educational assistance used for living expenses will be counted as income in accordance with SC Medicaid rules.

Section 13.2 Determining Household Eligibility (1) Month of Application: This section has been corrected to show that a benefit will not be issued if the computation results in an allotment of less than $10.

Section 13.2 Determining Household Eligibility (3) Anticipated Changes: This section has been reworded for clarity.

Section 13.6 (1) Net Monthly Income: Verbiage has been added to this section to clarify the maximum excess shelter amounts. Links to the Income Deductions and Excess Shelter Deduction have been added.

Section 13.6 (2) Eligibility: The table containing the gross and net monthly income limits has been updated for FFY 2015.

Section 15.7 (C): Unclear Information: A sentence has been reworded for clarity.

Section 16.1 Use of Notice: A note was added to clarify the advance notice period that must be allowed when taking an adverse action on a SNAP case.

Section 18.9 Fair Hearing Procedures: An exception was added to clarify that fair hearing cases should be handled by the county of residence for system generated actions.

SNAP Toolkit 4: Acceptable Verification of Alien Eligibility: The INS form number for Alien Registration Receipt Card has been corrected from I-551 to I-151.

SNAP Tool Kit 7: The SNAP 2 WORK Referral Guide: The guide has been replaced with an updated version dated 04/15/15.

SNAP Tool Kit 8: National Directory of Contacts: The National Directory of Contacts has been added.

Volume 26 July 2015

Section 2.3 Ineligible Household Members (8) B: A link has been added to show the connection with section 14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA's).

Section 2.3 Ineligible Household Members (8) C: A link has been added to show the connection with section 14.4 Residents of a Group Living Arrangement (GLA).

Section 2.3 Ineligible Household Members (8) D: A link has been added to show the connection with section 14.5 Shelter for Battered Women and Children.

Section 2.3 Ineligible Household Members (8) E: A link has been added to show the connection with section 14.6 Homeless SNAP Households.

Section 3.7 Interviews: This section has been changed to clarify that households in which all adult members are elderly or disabled "with no earned income" are certified for 24 months.

Section 6.2 Aggregate Allotments: The title of this section now includes the word "COMBINED".

Section 12.6 Dependent Care Deduction: This section has been changed to clarify that a dependent "should be in the SNAP household or should reside in the home of the SNAP household member"; and to clarify that the household must pay an individual outside of the SNAP household for the service.

Section 13.8 (1) (C) Certification Periods: This section has been changed to clarify that the agency will certify for up to 24 months households in which all adult members are elderly or disabled "with no earned income".

Section 14.3 Residents of Drug and Alcohol Treatment and Rehabilitation Programs (DAA's): A link has been added to show the connection with section 2.3 (8) (B) Ineligible Household Members.

Section 14.4 Residents of a Group Living Arrangement (GLA): A link has been added to show the connection with section 2.3 (8) (C) Ineligible Household Members.

Section 14.5 Shelter for Battered Women and Children: A link has been added to show the connection with section 2.3 (8) (D) Ineligible Household Members.

Section 14.6 Homeless SNAP Households: A link has been added to show the connection with section 2.3 (8) (E) Ineligible Household Members.

Section 15.3 Simplified Reporting Households: This section has been changed to clarify that households in which all "adult" members are elderly or disabled with no earned income are assigned a 24 month certification period; and to clarify that these SNAP households are not subject to simplified reporting requirements within each six month certification.

Section 17.1 (2) Recertification Application: The verbiage in this section has been changed to reflect the correct form number of the DSS 3807A.

Section 17.2 Recertification Interview: This section has been changed to clarify that households receive a 24 month certification period when all "adult" members are elderly or disabled "with no earned income"; and the verbiage has been changed to reflect the correct form number of the DSS 3808.

Section 18.2 Time Frames: The missing word "days" has been added to this section for clarity.

Section 20.5 Intentional Program Violation (IPV) Disqualification Time Periods: The chart has been updated to reflect the information in the Benefit Integrity Manual.

Section 22.4 Authorizing EBT Issuance: This section has been changed to clarify that benefits must be authorized no later than the "sixth" day after the application date so that eligible households can participate by the seventh day.

SNAP Tool Kit 7: The SNAP 2 WORK Referral Guide: The guide has been replaced with an updated version dated 07/01/15.

SNAP Tool Kit 9: SNAP Cheat Sheets: This tool kit will contain various cheat sheets that are used on a regular basis by Economic Services staff. The Processing Standards for Expedited Service is the first cheat sheet included in this tool kit.

Volume 27 December 2015

Section 2.1 General Household Definitions: This section has been updated to clarify that an individual or "a group of individuals" may buy and prepare meals separately from others.

Section 2.2 Special Household Requirements: This section has been updated to clarify that a person who is living with his/her spouse must be included in the same SNAP household with the spouse.

Section 5.5 Income Verification Eligibility System (IEVS)/ State Eligibility Verification System (SVES): Verbiage was added to clarify that IVES and SVES must be matched when adding individuals to the household (including a previously sanctioned individual).

Section 7.4 Students: This section has been updated to clarify that halftime enrollment must be defined by the institution.

Section 9.3 Referrals To The SNAP 2 Work Program: Verbiage was added to this section to clarify that individuals identified as ABAWDs must be referred to SNAP 2 WORK when added back to the SNAP household after serving a sanction.

Section 11.1 (2) Net Income eligibility standards: The table containing gross and net monthly income limits has been updated for the Federal Fiscal Year 2016.

Section 11.5 Unearned Income (J) Dividends, interest income and royalties: "Interest income and royalties" and the "NOTE" have been removed.

Section 11.5 Unearned Income (K) Dividends from excludable resources: The NOTE: "All resources are excluded from categorically eligible households" has been added.

Section 11.5 Unearned Income (U) Interest income, dividends and royalties: "Dividends and royalties" have been removed.

Section 11.5 Unearned Income (II) Royalties, dividends and interest income: "Dividends and interest income" and the "NOTE" have been removed.

Section 12.1 Income Deductions/General: The maximum excess shelter, MUA and BUA amounts have been updated to reflect changes effective 10/01/2015.

Section 12.2 Standard Deduction: The standard deduction amounts have been updated to reflect the increases effective 10/01/2015.

Section 13.1 Prospective Eligibility: A word was changed for clarity.

Section 13.5 Determining Deductions: This section has been changed to clarify that allowable deductions for dependent care expenses can only be granted if service is provided by someone outside of the SNAP household and the SNAP household must be making a money payment for the service.

Section 13.6 (2) Eligibility: The table containing the gross and net income limits has been updated for the Federal Fiscal Year 2016.

Section 14.3 (1) DAA Eligibility for SNAP: The website for South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) has been corrected for clarity.

Section 15.4 Interim Changes for Simplified Reporting Household: The subtitle in this section was changed to indicate the interim changes are considered verified upon receipt. Death Reports were removed and Employment information and Fleeing Felon Alerts were added.

Section 19.1 Definition of the South Carolina Combined Application Project (SCCAP): This section contains changes in shelter thresholds for “shelter high” and “shelter low” SCCAP households.

SNAP Tool Kit 8: National Directory of Contacts: The National Directory of Contacts has been updated to list the new email address and fax number for out of state inquiries for SNAP and TANF benefits for the state of South Carolina.

Volume 28 February 2016

Section 2.3 Ineligible Household Members (6): This section has been updated to include the verification of a pardon as an exception to the felony drug conviction disqualification effective February 2016.

Section 5.1 (9) Medical Expenses: This section has been updated to clarify the amount of medical expenses that must be verified in order to qualify for the Standard Medical Deduction and the Excess Medical Deduction.

Section 5.7 Verification Subsequent to Initial Certification: This section has been updated to clarify that the verified amount of the medical expenses will determine whether or not the household qualifies for a medical deduction.

Section 12.1 Income Deductions/General (I): A link has been added to refer to Section 12.8, Medical Deduction for information concerning the Standard Medical Deduction and the Excess Medical Deduction.

Section 12.8 Medical Deduction: This section has been updated to remove the word "Excess" from the section title and to provide November 2015 as the effective date of the Standard Medical Deduction, as well as the verified amounts required to qualify for this deduction.

Section 12.8 Medical Deduction (1) Non-recurring medical expenses: The word "adult" has been added to this section for clarity.

Section 13.6 Calculating Net Income and Benefit Levels (1) (D) Net monthly income: This section has been updated to remove the phrase "an excess" and to remove the word "Excess" from the link.

Section 13.6 (1) (H) Net Monthly Income: This section has been updated to clarify that if the amount of the Shelter Cost deduction is computed to a negative number, a zero (0) must be entered in the SNAP Manual Benefit Calculation.

Section 19.4 Exception to South Carolina Combined Application Project (SCCAP) Eligibility: The phrase "out-of-pocket" has replaced the word "excess" for clarity.

Appendix 2: Chapter 10 Resource Eligibility Standards

10.1 Uniform Standards for SNAP Resource Eligibility Standards

The Agency will apply the uniform national resource standards of eligibility to all applicant and recipient households unless the household is categorically eligible as defined in **Chapter 4, Categorically Eligible Households**.

10.2 Maximum Allowable Resources

The maximum allowable resources, including both liquid and non-liquid assets, of all members of the household shall not exceed $2,000 for the household, except that, for households including one or more disabled members or members age 60 or over, such resources shall not exceed $3250.

10.3 Definition of Resources

The value of nonexempt resources, except for licensed vehicles as specified in **Section 10.3 Definition of Resources** (B) vii, will be its equity value.

The equity value is the fair market value of a resource minus any indebtedness. In determining the resources of a household, the following will be included and documented by the Agency in sufficient detail to permit verification:

(A) Liquid resources. The following chart describes types of liquid resources and how they are treated:

Liquid Resource	Description/ Special Treatment
(i) Bank Accounts (checking or saving)/ financial accounts	Exclude current month's income. If jointly owned, see **Section 10.4 Jointly Owned Resources.** Jointly owned accounts include accounts in more than one name, connected by "and" or "or".
(ii) Burial contract (prepaid)	Exclude one burial contract per household member of $1500 or less in equity value. Count any equity value above $1500.
(iii) Cash on hand	Exclude current month's income.
(iv) Cash from sale of real property	Count as lump sum resource in the month of sale and in following months if money remains **(See Section 10.5 Lump Sum Payments as Resources)**.
(v) Cash received from estate settlements	
(vi) ~~Federal/state income tax refunds~~	This is no longer considered a Resource – Effective May 1, 2013
(vii) Individual Development Account (IDA)	Categorical eligibility rules apply (see **Section 4.1 Temporary Assistance for Needy Families (TANF)/ Supplemental Security Income (SSI) Categorically Eligible Households**

(viii) Individual retirement accounts (IRA's)/ Keogh plans	Funds held in individual retirement accounts (IRA's), and funds held in Keogh plans which do not involve the household member in a contractual relationship with individuals who are not household members.
(ix) Lump sum payments	See **Section 10.5 Lump Sum Payments as Resources**.
(x) Refunds of security deposits	
(xi) Revocable trust account	
(xii) Savings certificates	If jointly owned, see **Section 10.4 Jointly Owned Resources.**
(xiii) Stocks/ bonds	
(xiv) Vacation pay to laid off employees	Count as income if received monthly in less than one installment. If withdrawn in a lump sum payment or if not withdrawn, count as a resource.

(B) Non-liquid resources. The following chart describes types of non- liquid resources and how they are treated:

Non-liquid Resource	Description/ Special Treatment
(i) Building(s) not associated with the homestead	Count building(s) on the property other than the homestead residence and its outbuildings.
(ii) Land	Provided that these resources are not specifically excluded under **Section 10.7 Exclusions from Resources**
(iii) Lifetime rights to property	Count only if rights can be sold or leased.
(iv) Non-homestead property	Count equity value unless there is a good faith effort to sell (see **Section 10.7 Exclusions from Resources (S).**
(v) Personal property	Provided that these resources are not specifically excluded under **Section 10.7 Exclusions from Resources**
(vi) Recreational properties (and any other property)	Provided that these resources are not specifically excluded under **Section 10.7 Exclusions from Resources**
(vii) Vehicles (licensed) **a. One licensed vehicle** **b. Any other licensed vehicle that a household member under age 18 drives to work, school, training or to look for work.** **c. All other licensed vehicles: cars, boats, recreational vehicles motorcycles, etc.**	Provided that these resources are not specifically excluded under **Section 10.7 Exclusions from Resources** and unless the household is categorically eligible as defined in see **Section 4.1 Temporary Assistance for Needy Families (TANF)/ Supplemental Security Income (SSI) Categorically Eligible Households**: a. Count fair market value over $4650. b. Count fair market value over $4650. c. Count the higher of either fair market value over $4650 or equity value.
(viii) Vehicles (unlicensed)	Provided that these resources are not specifically excluded under **Section 10.7 Exclusions from Resources** and unless the household is categorically eligible as defined in see **Section 4.1 Temporary Assistance for Needy Families (TANF)/ Supplemental Security Income (SSI) Categorically Eligible Households:** Count equity value.

For a household containing a sponsored alien, the Agency must deem the resources of the sponsor and the sponsor's spouse in accordance with **Section 7.3 Citizenship and Alien Status, (4) deeming of sponsor's income and resources.**

10.4 Jointly Owned Resources

Resources owned jointly by separate households will be considered available in their entirety to each household, unless it can be demonstrated by the applicant household that such resources are inaccessible to that household. If the household can demonstrate that it has access to only a portion of the resource, the value of that portion of the resource shall be counted toward the household's resource level.

The resource shall be considered totally inaccessible to the household if the resource cannot practically be subdivided and the household's access to the value of the resource is dependent on the agreement of a joint owner who refuses to comply. For the purpose of this provision, ineligible aliens or disqualified individuals residing with the household will be considered household members. Resources shall be considered inaccessible to persons residing in shelters for battered women and children, as defined in Section **14.5 Shelter for Battered Women and Children**, if

(A) The resources are jointly owned by such persons and by members of their former household; and

(B) The shelter resident's access to the value of the resources is dependent on the agreement of a joint owner who still resides in the former household.

10.5 Lump Sum Payments as Resources

Lump sum payments are treated a resources in the month received. If the lump sum includes a payment for the current month, the amount of that payment must be deducted from the lump sum and shown as income.

10.6 Determining the Value of Countable Vehicle

Once ownership of a vehicle has been determined, a decision must be made to the fair market value of the vehicle. The fair market value of the vehicle will be determined by the wholesale value (Av's Trade-In) of the vehicle as listed in the National Automobile Dealers (NADA) Used Car Guide Book. The basic value of a vehicle cannot be changed by using "add" or "deduct" factors.

Any household who claims that the NADA value does not apply to their vehicle must be given the opportunity to obtain verification of the true value from a reliable source.

NOTE: The fair market value of a vehicle may also be determined through the use of Internet websites. The Agency must assign the wholesale value to the vehicle and will not increase the basic value by adding the value of low mileage or optional equipment. If condition is required, assume average condition and average mileage (approximately 12,000 per year for the first five years and 10,000 per

year thereafter, if an actual number is required). The web site information should be copied and used for case file documentation. The acceptable free web sites include:

- ***AutoPricing.com***
- ***CarPrices.com***
- ***Edmund's***
- ***Intellichoice***
- ***Kelley Blue Book***
- ***NADA (fee based web site). The NADA free web site must not be used for vehicle valuation.***

Unless questionable, the Agency must accept the household's statement as to fair market value of any vehicle six years old or older. The fair market value of custom made, antique and classic vehicles must be verified, regardless of age.

10.7 Exclusions from Resources

The Agency may require verification of the value of a resource to be excluded if the information provided by the household is questionable. In determining the resources of a household, only the resources included in the following will be excluded.

Excluded Resource	Description	Special Treatment
(A) Burial Plot	**One burial plot per household member**	
(B) Cash value of resources not accessible to the household	**Resources having cash value which is not accessible to the household, such as but not limited to security deposits on rental property or utilities, or property in probate.**	
(C) Earned income tax credits	**Earned income tax credits will be excluded as follows:** **(i) A Federal earned income tax credit received either as a lump sum or as payments under section 3507 of the Internal Revenue Code for the month of receipt and the following month for the individual and that individual's spouse;** **(ii) Any Federal, State or local earned income tax credit received by any household member will be excluded for 12 months, provided the household was participating in the SNAP at the time of receipt of the earned income tax credit and provided the household participates continuously during that 12-month period.**	***NOTE: Breaks in participation of one month or less due to administrative reasons, such as delayed recertification or missing or late monthly reports, will not be considered as nonparticipation in determining the 12-month exclusion***
(D) Energy assistance	**Energy assistance payments or allowances excluded as income.**	
(E) Federal statue	**Resources which are excluded for SNAP purposes by express provision of Federal statute.**	

(F) Funeral agreement	**The value of one bona fide funeral agreement per household member, provided that the agreement does not exceed $1,500 in equity value, in which event the value above $1,500 is counted.**	
(G) Governmental payments designated for the restoration of a home damaged in a disaster	**Any governmental payments which are designated for the restoration of a home damaged in a disaster, if the household is subject to a legal sanction if the funds are not used as intended; i.e., payments made by the Department of Housing and Urban Development through the Individual and Family Grant Program or disaster loans or grants made by the Small Business Administration.**	
(H) Home and surrounding property	**The home and surrounding property which is not separated from the home by intervening property owned by others. The home and surrounding property will remain exempt when temporarily unoccupied for reasons of employment, training for future employment, illness, or un-inhabitability caused by casualty or natural disaster, if the household intends to return.** **Households that currently do not own a home, but own or are purchasing a lot on which they intend to build or are building a permanent home, will receive an exclusion for the value of the lot and, if it is partially completed, for the home.**	***Public rights of way, such as roads which run through the surrounding property and separate it from the home, will not affect the exemption of the property,***
(I) Household goods and personal effects		
(J) Income Producing Property	**Property which annually produces income consistent with its fair market value, even if only used on a seasonal basis. Such property will include rental homes and vacation homes**	
(K) Income (resources prorated as income)	**Resources, such as those of students or self-employed persons, which have been prorated as income.**	***NOTE: The treatment of student income is explained in Section 7.4(4) and the treatment of self-employment income is explained in Section 11.4.***
(L) Indian lands	**Indian lands held jointly with the Tribe or land that can be sold only with the approval of the Department of the Interior's Bureau of Indian Affairs.**	
(M) Installment Contracts	**Installment contracts for the sale of land or buildings if the contract or agreement is producing income consistent with its fair market value. The exclusion will also apply to the value of the property sold under the installment contract, or held as security in exchange for a purchase price consistent with the fair market value of that property.**	
(N) Lien placed on non-liquid assets	**Non-liquid asset(s) against which a lien has been placed as a result of taking out a business loan and the**	

	household is prohibited by the security or lien agreement with the lien holder (creditor) from selling the asset(s).	
(O) Life insurance policies	**Cash value**	
(P) Pension plans or funds	**The cash value of pension plans or funds**	***Keogh plans which involve no contractual relationship with individuals who are not household members and individual retirement accounts (IRA's) will not be excluded under this section;***
(Q) Property (real or personal) directly related to the maintenance or use of an excluded vehicle	**Property, real or personal, to the extent that it is directly related to the maintenance or use of a vehicle excluded under Section 10.7 Exclusions from Resources (X). Only that portion of real property determined necessary for maintenance or use is excludable under this provision. For example, a household which owns a produce truck to earn its livelihood may be prohibited from parking the truck in a residential area. The household may own a 100-acre field and use a quarter-acre of the field to park and/or service the truck. Only the value of the quarter-acre would be excludable under this provision, not the entire 100-acre field.**	
(R) Property essential to employment/self employment	**Property, such as farm land or work related equipment, such as the tools of a tradesman or the machinery of a farmer, which is essential to the employment or self-employment of a household member. Property essential to the self-employment of a household member engaged in farming will continue to be excluded for one year from the date the household member terminates his/her self-employment from farming.**	
(S) Property (real) for sale	**Real property which the household is making a good faith effort to sell at a reasonable price and which has not been sold.**	***NOTE: The Agency may verify that the property is for sale and that the household has not declined a reasonable offer. Verification may be obtained through a collateral contact or documentation, such as an advertisement for public sale in a newspaper of general circulation or a listing with a real estate broker.***
(T) SSI recipients	**The resources of a household member who receives SSI benefits. A household member is considered a recipient of these benefits if the benefits have been authorized but not received, if the benefits are suspended or recouped, or if the benefits are not paid because they are less than a minimum amount.**	***NOTE: Individuals entitled to Medicaid benefits only are not considered recipients of SSI.***
(U) TANF Recipients	**The resources of a household member who receives TANF benefits. A household member is considered a recipient of these benefits if the benefits have been**	***NOTE: Individuals entitled to Medicaid benefits only are***

	authorized but not received, if the benefits are suspended or recouped, or if the benefits are not paid because they are less than a minimum amount.	***not considered recipients of TANF.***
(V) Trusts (Irrevocable)	**Any funds in a trust or transferred to a trust, and the income produced by that trust to the extent it is not available to the household (irrevocable trust funds), will be considered inaccessible to the household if:** **(i) The trust arrangement is not likely to cease during the certification period and no household member has the power to revoke the trust arrangement or change the name of the beneficiary during the certification period;** **(ii) The trustee administering the funds is either:** • **A court, or an institution, corporation, or organization which is not under the direction or ownership of any household member; or** • **An individual appointed by the court who has court imposed limitations placed on his/her use of the funds which meet the requirements of this paragraph;** **(iii) Trust investments made on behalf of the trust do not directly involve or assist any business or corporation under the control, direction, or influence of a household member; and** **(iv) The funds held in irrevocable trust are either:** **Established from the household's own funds, if the trustee uses the funds solely to make investments on behalf of the trust or to pay the educational or medical expenses of any person named by the household creating the trust, or** • **Established from non-household funds by a non-household member.**	
(W) Unable to sell (for significant return)	**Resources that, as a practical matter, the household is unable to sell for any significant return because the household's interest is relatively slight or the costs of selling the household's interest would be relatively great or if its sale or other disposition is unlikely to produce any significant amount of funds for the support of the household or the cost of selling the resource would be relatively great. This provision does not apply to financial instruments such as stocks, bonds, and negotiable financial instruments.**	***NOTE: "Significant return" means any return, after estimating costs of sale or disposition, and taking into account the ownership interest of the household, that the Agency determines are more than $1,500. "Any significant amount of funds" means funds amounting to more than $1,500.***
(X) Vehicles (Licensed)	**Licensed vehicles that meet the following conditions:**	***NOTE: Military personnel from out of state are not***

	(i) One licensed, registered vehicle per licensed driver in the household. To receive this exclusion, both the license and registration must be issued in South Carolina (SC). **(ii) Used for income-producing purposes; such as, but not limited to, a taxi, truck, or fishing boat, or a vehicle used for deliveries, to call on clients or customers, or required by the terms of employment;** **(iii) That have previously been used by a self-employed household member engaged in farming but are no longer used in farming because the household member has terminated his/her self-employment from farming must continue to be excluded as a resource for one year from the date the household member terminated his/her self-employment farming;** **(iv) Annually producing income consistent with its fair market value, even if used only on a seasonal basis;** **(v) Necessary for long-distance travel, other than daily commuting, that is essential to the employment of a household member (or ineligible alien or disqualified person whose resources are being considered available to the household; i.e. the vehicle of a traveling sales person or a migrant farm worker following the work stream);** **(vi) Used as the household's home and, therefore, excluded under Section 10.7 Exclusions from Resources (H);** **(vii) Necessary to transport a physically disabled household member (or physically disabled ineligible alien or physically disabled disqualified person whose resources are being considered available to the household) regardless of the purpose of such transportation (limited to one vehicle per physically disabled household member).** **The vehicle need not have special equipment or be used primarily by or for the transportation of the physically disabled household member; or** **(viii) Necessary to carry fuel for heating or water for home use when the transported fuel or water is anticipated to be the primary source of fuel or water for the household during the certification period. Households must receive this resource exclusion without**	***required to obtain a current SC driver's license or vehicle registration.*** ***NOTE: The exclusions in Section 10.7 Exclusions from Resources (X (ii) through (v) will apply when the vehicle is not in use because of temporary unemployment, such as when a taxi driver is ill and cannot work, or when a fishing boat is frozen in and cannot be used.*** ***Exception: This does not apply to household members with mental disabilities only.***

	having to meet any additional tests concerning the nature, capabilities, or other uses of the vehicle. **Households must not be required to furnish documentation, as mandated by §273.2(f)(4), unless the exclusion of the vehicle is questionable. If the basis for exclusion of the vehicle is questionable, the State agency may require documentation from the household, in accordance with §273.2(f)(4).** **(ix) The value of the vehicle is inaccessible, in accordance with Section 10.7 Exclusions from Resources (S), because its sale would produce an estimated return of not more than $1,500.** **(x) Leased vehicle while the title is retained by the owner.**	***NOTE: The vehicle does not have to be licensed or operable. This exclusion may apply to all vehicles in the household.*** ***NOTE: At the point in time that the household actually buys the vehicle, it becomes a resource for the household. Also, any dollar value accrued in the lease is counted as a lump sum at the point in time that it is refunded to the household.***

When an exclusion applies because of use of a resource by or for a household member, the exclusion will also apply when the resource is being used by or for an ineligible alien or disqualified person whose resources are being counted as part of the household's resources.

For example, work related equipment essential to the employment of an ineligible alien or disqualified person shall be excluded (in accordance **Section 10.7 Exclusions from Resources (R)**, as shall one burial plot per ineligible alien or disqualified household member (in accordance with **Section 10.7 Exclusions from Resources (A))**.

10.8 Handling of Excluded Funds

Excluded funds that are kept in a separate account, and that are not commingled in an account with non-excluded funds, will retain their resource exclusion for an unlimited period of time. The resources of students and self-employment households which are excluded as provided in **Section 10.7 Exclusions from Resources (K)** and are commingled in an account with non-excluded funds shall retain their exclusion for the period of time over which they have been prorated as income. All other excluded moneys which are commingled in an account with non-excluded funds will retain their exemption for six months from the date they are commingled.

After six months from the date of commingling, all funds in the commingled account shall be counted as a resource.

10.9 Transfer of Resources

At the time of application, households subject to resource determination will be asked to provide information regarding any resources which any household member (or ineligible alien or disqualified person whose resources are being considered available to the household) had transferred within the 3-month period immediately preceding the date of application. Households which have transferred resources knowingly for the purpose of qualifying or attempting to qualify for SNAP benefits will be disqualified from participation in the program for up to 1 year from the date of the discovery of the transfer.

This disqualification period shall be applied if the resources are transferred knowingly in the 3-month period prior to application or if they are transferred knowingly after the household is determined eligible for benefits. An example of the latter would be assets which the household acquires after being certified and which are then transferred to prevent the household from exceeding the maximum resource limit.

Eligibility for SNAP benefits will not be affected by the following transfers:

(A) Resources which would not otherwise affect eligibility, for example, resources consisting of excluded personal property such as furniture or of money that, when added to other nonexempt household resources, totaled less at the time of the transfer than the allowable resource limits;
(B) Resources which are sold or traded at, or near, fair market value;
(C) Resources which are transferred between members of the same household (including ineligible aliens or disqualified persons whose resources are being considered available to the household); and
(D) Resources which are transferred for reasons other than qualifying or attempting to qualify for food stamp benefits, for example, a parent placing funds into an educational trust fund described in paragraph (e)(9) of this section.

In the event the Agency establishes that an applicant household subject to resource determination knowingly transferred resources for the purpose of qualifying or attempting to qualify for SNAP benefits, the households will be sent a notice of denial explaining the reason for and length of the disqualification. The period of disqualification will begin in the month of application.

If the household is participating at the time of the discovery of the transfer, a notice of adverse action explaining the reason for and length of the disqualification will be sent.

The period of disqualification will be made effective with the first allotment to be issued after the notice of adverse action period has expired, unless the household has requested a fair hearing and continued benefits (See **Chapter 18 Fair Hearings**).

The length of the disqualification period will be based on the amount by which nonexempt transferred resources, when added to other countable resources, exceeds the allowable resource limits.

Amount in excess of the resource limit	Period of disqualification (months)
$ 0 to 249.99	1
250 to 999.99	3
1,000 to 2999.99	6
3,000 to 4,999.99	9
5,000 or more	12